POOR LEGIBILITY

PORTIONS OF THIS DOCUMENT MAY BE UNREADABLE, DUE TO THE QUALITY OF THE ORIGINAL

NUS CORPORATION
1927 LAKESIDE PARKWAY
SUITE 614
TUCKER, GEORGIA 30084
404-938-7710

1864

C-586-4-9-76

April 12, 1989

Mr. A. R. Hanke
Site Investigation and Support Branch
Waste Management Division
Environmental Protection Agency
345 Courtland Street, N. E.
Atlanta, Georgia 30365

Date: _____
Site Disposition: _____
EPA Project Manager: _____

Subject: Screening Site Inspection, Phase I
Anaconda Ind. Inc. Magnet Wire and Cable
LaGrange, Oldham, Kentucky
EPA ID No. KYD042943423
TDD No. F4-8808-70

Dear Mr. Hanke:

FIT 4 was tasked to conduct a Screening Site Inspection of the Anaconda Ind. Inc. Magnet Wire and Cable facility in LaGrange, Oldham County, Kentucky. Phase I of this inspection included a review of EPA and state file material, completion of a target survey and a drive-by reconnaissance of the site.

The Anaconda Ind. Inc. Magnet Wire and Cable facility is located on Hwy. 146, just north of LaGrange, Kentucky (Ref. 1). The facility has been in operation since 1967 and manufactures numerous types of magnet wire and cables. From the process, a waste caustic wash solution, waste varnish and various unknown waste solvents are generated. On March 17, 1985, 250 gallons of cresylic acid were accidentally released into an 18-inch storm sewer that leads to an earthen ditch and ultimately to a "cooling pond", all of which are located on Anaconda property. The waste was allowed to settle to the bottom of the pond, and then it was pumped into 55-gallon drums. Eventually, 45 drums were filled with the waste (Refs. 2, 3).

In 1982, 100 drums, which bore the Anaconda Inc. name and contained phenolic compounds, were dumped on private property in LaGrange, Kentucky. This site is known as the Dawkins Road Dump or Jim Sanders Dump (EPA I.D. #KYD980839286). Samples taken by the state at this site revealed high concentrations of phenol, napthalene and cresylic acid (Ref. 4).

The facility is located in the Outer Blue Grass subdivision of the Blue Grass region of Kentucky. This region is underlain by interbedded limestones and shales of Ordovician and Silurian age. The regional climate is the humid continental type with a mean annual temperature of 55°F and annual regional precipitation of about 43 inches (Ref. 8). Regional lake evaporation is 35 inches leaving a net precipitation of 8 inches (Ref. 9).

Groundwater occurs in the area primarily within the karst features of the underlying limestones. The facility is located in the center of a valley. The valley is underlain by Silurian to Ordovician age carbonates and shales present as follows in descending order: the Laurel Dolomite, the Osgood Formation, the Brassfield Limestone, the Saluda Limestone, the Liberty Formation and the Waynesville Limestone (Ref. 12, sheets; Ref. 11). The collective thickness of these carbonates is approximately 105-130 feet in the Oldham County area.

The Laurel Dolomite is exposed at the surface in the site area and is capable of yields of 100 to 500 gallons per minute to wells that are in valleys (Ref. 12). The movement of groundwater is through cracks and openings in thicker limestone units, and has enlarged these openings and created cavities and voids in the rock (Ref. 8, p. 23). The depth to the groundwater is unknown; however, the water table in the region tends to roughly parallel the topography and will fluctuate with local rainfall (Ref. 8). Few wells obtain water from depths below about 100 feet below land surface (Ref. 8, p. 21).

The city of LaGrange purchases water from Ohio Oldham Water Department and serves 1533 connections. Ohio Oldham Water Department obtains its water from five wells in Westport, Kentucky, approximately 9 miles from the facility. They serve approximately 3200 connections and cover the entire 4-mile radius of the facility with water lines (Ref. 5).

Not all residents use municipal water. They obtain their water from springs and cisterns. Wells are not common because of the high sulfur content in the groundwater (Ref. 6). There are no wells within the 4-mile radius. A private spring is located approximately 2000 feet northeast of the site (Refs. 5, 7). This spring is used for irrigation purposes.

Surface water at the site drains northwest into an intermittent stream approximately 500 feet from the facility. From there it flows into a freshwater wetland approximately 2.5 miles downstream from the facility. This wetland is 40 acres in size. From the swampy area, it proceeds into Harrods Creek and into the Ohio River approximately 20 miles downstream from the facility. Harrods Creek is heavily fished for catfish and bass, but it is not used as a source of drinking water (Refs. 1, 13).

The area surrounding the facility is mainly industrial and wooded. The site itself is surrounded by an 8-foot, chain-link fence with a security gate at its entrance (Ref. 5).

Based upon the enclosures and the above-referenced material, it is recommended that no further remedial action be planned at the Anaconda Ind. Inc. Magnet Wire and Cable facility. If you have any questions regarding this site, please feel free to contact me.

Very truly yours,

Jeff Myers
Project Manager

Approved:

JM/dwf

Enclosures

REFERENCES

1. U.S. Geological Survey, 7.5 minute series Topographic Quadrangle Maps of Kentucky: LaGrange 1969 (Photorevised 1978), Smithfield 1969 (Photorevised 1978), Crestwood 1969, Ballardsville 1961 (Photorevised 1978), scale 1:2400.

2. Henry W. Jones, Sr. Engineer, Energy and Environment, Anaconda Ind. Inc. Magnet Wire and Cable, letter to William C. Burger, Coordinator, Environmental Response Team, March 29, 1985. Subject: A sudden release of hazardous materials.

3. John Brooks, Environmental Supervisor, Division of Waste Management, Department of Environmental Protection, Louisville Kentucky, letter to Robert P. Carne, Engineering Manager, Anaconda Ind. Inc. Magnet Wire and Cable. January 28, 1986. Subject: Inspection on January 22, 1986.

4. Robert L. Prewitt, Environmental Program Coordinator, memorandum to Caroline P. Haight, Manager, Permit Review Branch, Dept. of Environmental Protection, Frankfort, Kentucky, August 9, 1985. Subject: Uncontrolled Closeout for Anaconda, Inc. Magnet Wire and Cable.

5. NUS Corporation Field Logbook No. F4-1103 for Anaconda Ind. Inc. Magnet Wire and Cable, TDD No. F4-8808-70. Documentation of facility reconnaissance, October 31, 1988.

6. Greg Lewis, LaGrange, Kentucky Health Department, telephone conversation with Jeff Myers, NUS Corporation, November 4, 1988. Subject: Private water sources in LaGrange, Kentucky.

7. NUS Corporation, Well Inventory Form, October 31, 1988.

8. W.N. Palmquist, Jr. and F.R. Hall, "Reconnaissance of Ground-Water Resources in the Blue Grass Region Kentucky, "Water Supply Paper 1533, (U.S. Geological Survey, 1961), pp. 5, 7, 19-24.

9. U.S. Dept. of Commerce, Climatic Atlas of the United States, (Washington, D.C.: GPO,, June 1968) Reprint: 1983, National Oceanic and Atmospheric Administration.

10. U.S. Dept. of Agriculture, Soil Conservation Service, "Soil Survey of Oldham County Kentucky," (November, 1977) p. 1, 24.

11. R.C. McDowell et al, "Geologic Map of Kentucky," (U.S. Geological Survey in cooperation with the Kentucky Geological Survey, 1981) Scale 1:250,000.

12. W.N. Palmquist, Jr. and F.R. Hall, "Availability of Ground Water in Bullitt, Jefferson and Oldham Counties, Kentucky," Hydrologic Investigations Atlas HA-22, (U.S. Geological Survey, 1960), sheet 3 of 3.

13. Benjy Kinman, Kentucky Dept. of Fish and Wildlife, telephone conversation with Jeff Myers, NUS Corporation, November 10, 1988. Subject: Use of Harrods Creek.

RCRA/NPL POLICY QUESTIONNAIRE FOR INITIAL SCREENING

Site Name: Anaconda Ind Inc. Magnet Wire and Cable

City: La Grange State: Kentucky

EPA I.D. Number: KYD 042943423

Type of Facility: Generator ✓ Transporter ___ Disposal ___
Treatment ___ Storage (more than 90 days) ___

I. RCRA APPLICABILITY	yes	no
Has this facility treated, stored or disposed of a RCRA hazardous waste since Nov. 19, 1980?	___	✓
Has a RCRA Facility Assessment (RFA) been performed on this site?	___	✓
Does the facility have a RCRA operating or post-closure permit? If so, date issued _____	___	✓
Did the facility file a RCRA Part A application?	✓	___
If so:		
1) Does the facility currently have interim status?	___	✓
2) Did the facility withdraw its interim status?	___	✓
3) Is the facility a known or possible protective filer?	✓	___
Is the facility a late (after Nov. 19, 1980) or non-filer that has been identified by EPA or the State?	___	✓

STOP HERE IF ALL ANSWERS TO QUESTIONS IN SECTION I ARE NO

II. FINANCIAL STATUS		
Is the facility owned by an entity that has filed for bankruptcy under federal or State laws?	___	___

III. RCRA ENFORCEMENT STATUS		
Has the facility lost authorization to operate or had its interim status revoked?	___	___
Has the facility been involved in any other RCRA enforcement action?	___	___

RECONNAISSANCE CHECKLIST FOR HRS2 CONCERNS

Instructions: Obtain as much "up front" information as possible prior to conducting fieldwo Complete the form in as much detail as you can, providing attachments as necessary. Cite the sou for all information obtained.

Site name: Anaconda Ind. Inc. Magnet Wire and Cable
City, County, State: LaGrange, Oldham, Kentucky
EPA ID No.: KYD042943423
Person responsible for form: Jeff Myers
Date: 10-21-88

Air Pathway

Describe any potential air emission sources onsite: None

Identify any sensitive environments within 4 miles: None

Identify the maximally exposed individual (nearest residence or regularly occupied building - workers do count): The nearest resident to the facility is approximately 2000 ft. away. There is also a private spring at this location

Groundwater Pathway

Identify any areas of karst terrain: None

Identify additional population due to consideration of wells completed in overlying aquifers to the AOC: Wells are uncommon to the area because of a heavy sulfur content, but there is a private spring just 2000 ft. from the facility

Do significant targets exist between 3 and 4 miles from the site? No

Is the AOC a sole source aquifer according to Safe Drinking Water Act? (i.e. is the site located in Dade, Broward, Volusia, Putnam, or Flager County, Florida) No

Surface Water Pathway

Are there intakes located on the extended 15-mile migration pathway? No

Are there recreational areas, sensitive environments, or human food chain targets (fisheries) along the extended pathway? Harrods creek is fished heavily for bass & catfish.

Onsite Exposure Pathway

Is there waste or contaminated soil onsite at 2 feet below land surface or higher? No

Is the site accessible to non-employees (workers do not count)? The facility is surrounded by a chain link fence

Are there residences, schools, or daycare centers onsite or in close proximity? The nearest resident is approximately 2000 ft. ~~away~~

Are there barriers to travel (e.g., a river) within one mile? No

HAZARD RANKING SYSTEM SCORING SUMMARY

FOR

ANACONDA IND. INC. MAGNET WIRE & CABLE
EPA SITE NUMBER KYD042243422
LAGRANGE
OLDHAM COUNTY, KY
EPA REGION: 4

SCORE STATUS: IN PREPARATION

SCORED BY JEFF MYERS
OF NUS CORPORATION
ON 11/07/88

DATE OF THIS REPORT: 04/11/89
DATE OF LAST MODIFICATION: 04/11/89

GROUND WATER ROUTE SCORE	:	5.70
SURFACE WATER ROUTE SCORE	:	2.42
AIR ROUTE SCORE	:	0.00
MIGRATION SCORE	:	4.12

HRS GROUND WATER ROUTE SCORE

CATEGORY/FACTOR	RAW DATA	ASN. VALUE	SCORE
1. OBSERVED RELEASE	NO	0	0
2. ROUTE CHARACTERISTICS			
DEPTH TO WATER TABLE	35 FEET		
DEP H TO BOTTOM OF WASTE	0 FEET		
DEPTH TO AQUIFER OF CONCERN	35 FEET	2	4
PRECIPITATION	43.0 INCHES		
EVAPORATION	35.0 INCHES		
NET PRECIPITATION	8.0 INCHES	2	2
PERMEABILITY	1.0X10-2 CM/SEC	3	3
PHYSICAL STATE		3	3
TOTAL ROUTE CHARACTERISTICS SCORE:			12
3. CONTAINMENT		2	2
4. WASTE CHARACTERISTICS			
TOXICITY/PERSISTENCE:CRESOLS (ORTHO,META & PARA)			9
WASTE QUANTITY CUBIC YDS	0		
DRUMS	0		
GALLONS	250		
TONS	0		
TOTAL	1 CU. YDS	1	1
TOTAL WASTE CHARACTERISTICS SCORE:			10
5. TARGETS			
GROUND WATER USE		2	4
DISTANCE TO NEAREST WELL	2000 FEET		
AND	MATRIX VALUE	10	10
TOTAL POPULATION SERVED	15 PERSONS		
NUMBER OF HOUSES	4		
NUMBER OF PERSONS	0		
NUMBER OF CONNECTIONS	0		
NUMBER OF IRRIGATED ACRES	0		
TOTAL TARGETS SCORE:			14

GROUND WATER ROUTE SCORE (Sgw) = 6.79

HRS SURFACE WATER ROUTE SCORE

CATEGORY/FACTOR	RAW DATA	ASN. VALUE	SCORE
1. OBSERVED RELEASE	NO	0	0
2. ROUTE CHARACTERISTICS			
SITE LOCATED IN SURFACE WATER	NO		
SITE WITHIN CLOSED BASIN	NO		
FACILITY SLOPE	0.2 %		
INTERVENING SLOPE	0.0 %	2	2
24-HOUR RAINFALL	2.5 INCHES	2	2
DISTANCE TO DOWN-SLOPE WATER	500 FEET	3	3
PHYSICAL STATE	3		3
TOTAL ROUTE CHARACTERISTICS SCORE:			10
3. CONTAINMENT	3		3
4. WASTE CHARACTERISTICS			
TOXICITY/PERSISTENCE:CRESOLS (ORTHO,META & PARA)			9
WASTE QUANTITY CUBIC YDS	0		
DRUMS	0		
GALLONS	250		
TONS	0		
TOTAL	1 CU. YDS	1	1
TOTAL WASTE CHARACTERISTICS SCORE:			10
5. TARGETS			
SURFACE WATER USE		E	6
DISTANCE TO SENSITIVE ENVIRONMENTS		0	0
COASTAL WETLANDS	NONE		
FRESH-WATER WETLANDS	NONE		
CRITICAL HABITAT	NONE		
DISTANCE TO STATIC WATER	> 3 MILES		
DISTANCE TO WATER SUPPLY INTAKE	> 3 MILES		
AND	MATRIX VALUE	0	0
TOTAL POPULATION SERVED	0		
NUMBER OF HOUSES	0		
NUMBER OF PERSONS	0		
NUMBER OF CONNECTIONS	0		
NUMBER OF IRRIGATED ACRES	0		
TOTAL TARGETS SCORE:			6

SURFACE WATER ROUTE SCORE (S_{sw}) = 5.42

HRS AIR ROUTE SCORE

CATEGORY/FACTOR	RAW DATA	ASN. VALUE	SCORE
1. OBSERVED RELEASE	NO	0	0
2. WASTE CHARACTERISTICS			
REACTIVITY:		MATRIX VALUE	
INCOMPATIBILITY			
TOXICITY			
WASTE QUANTITY: CUBIC YARDS			
DRUMS			
GALLONS			
TONS			
TOTAL			
TOTAL WASTE CHARACTERISTICS SCORE:			N/A
3. TARGETS			
POPULATION WITHIN 4-MILE RADIUS			
0 to 0.25 mile			
0 to 0.50 mile			
0 to 1.0 mile			
0 to 4.0 miles			
DISTANCE TO SENSITIVE ENVIRONMENTS			
COASTAL WETLANDS			
FRESH-WATER WETLANDS			
CRITICAL HABITAT			
DISTANCE TO LAND USES			
COMMERCIAL/INDUSTRIAL			
PARK/FOREST/RESIDENTIAL			
AGRICULTURAL LAND			
PRIME FARMLAND			
HISTORIC SITE WITHIN VIEW?			
TOTAL TARGETS SCORE:			0

AIR ROUTE SCORE (S_a) = 0.00

HAZARD RANKING SYSTEM SCORING CALCULATIONS
FOR
SITE: ANACONDA IND. INC. MAGNET WIRE & CABLE
AS OF 04/11/89

GROUND WATER ROUTE SCORE

ROUTE CHARACTERISTICS		12
CONTAINMENT	X	2
WASTE CHARACTERISTICS	X	10
TARGETS	X	16

= 3840 /57,330 X 100 = 6.70 = S_{gw}

SURFACE WATER ROUTE SCORE

ROUTE CHARACTERISTICS		13
CONTAINMENT	X	2
WASTE CHARACTERISTICS	X	10
TARGETS	X	6

= 1560 /64,350 X 100 = 2.42 = S_{sw}

AIR ROUTE SCORE

OBSERVED RELEASE 0 /35,100 X 100 = 0.00 = S_{air}

SUMMARY OF MIGRATION SCORE CALCULATIONS

	S	S^2
GROUND WATER ROUTE SCORE (S_{gw})	6.70	44.89
SURFACE WATER ROUTE SCORE (S_{sw}	2.42	5.86
AIR ROUTE SCORE (S_{air})	0.00	0.00
$S^2_{gw} + S^2_{sw} + S^2_{air}$		50.75
$\sqrt{(S^2_{gw} + S^2_{sw} + S^2_{air})}$		7.12
$S_M = \sqrt{(S^2_{gw} + S^2_{sw} + S^2_{air})}/1.73$		4.12

EPA

Potential Hazardous Waste Site

Site Inspection Report

[redacted]

Site Inspection Report

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 1 - SITE LOCATION AND INSPECTION INFORMATION

EPA

I. IDENTIFICATION
01 STATE: KYD | 02 SITE NUMBER: 042941342 3

II. SITE NAME AND LOCATION

01 SITE NAME: Anaconda Ind Magnet Wire and Cable
02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER: Highway 146 Box 29
03 CITY: LaGrange
04 STATE: Ky | 05 ZIP CODE: 40031
06 COUNTY: Oldham
07 COUNTY CODE: 185 | 08 CONG. DIST: 04
09 COORDINATES: LATITUDE 38° 25' 13.0" | LONGITUDE 085° 21' 22.0"
10 TYPE OF OWNERSHIP: [X] A. PRIVATE [ ] B. FEDERAL ____ [ ] C. STATE [ ] D. COUNTY [ ] E. MUNICIPAL [ ] F. OTHER ____ [ ] G. UNKNOWN

III. INSPECTION INFORMATION

01 DATE OF INSPECTION: 12 8 88 (MONTH DAY YEAR)
02 SITE STATUS: [X] ACTIVE [ ] INACTIVE
03 YEARS OF OPERATION: 1967 (BEGINNING YEAR) | Present (ENDING YEAR) ___ UNKNOWN
04 AGENCY PERFORMING INSPECTION: [ ] A. EPA [X] B. EPA CONTRACTOR NUS Corp. [ ] C. MUNICIPAL [ ] D. MUNICIPAL CONTRACTOR ____ [ ] E. STATE [ ] F. STATE CONTRACTOR ____ [ ] G. OTHER ____

05 CHIEF INSPECTOR	06 TITLE	07 ORGANIZATION	08 TELEPHONE NO
Jeff Myers	Project Manager	NUS Corp.	(404) 938-7710

09 OTHER INSPECTORS	10 TITLE	11 ORGANIZATION	12 TELEPHONE NO
			( )
			( )
			( )
			( )
			( )

13 SITE REPRESENTATIVES INTERVIEWED	14 TITLE	15 ADDRESS	16 TELEPHONE NO
			( )
			( )
			( )
			( )
			( )
			( )

17 ACCESS GAINED BY: [ ] PERMISSION [ ] WARRANT
18 TIME OF INSPECTION:
19 WEATHER CONDITIONS:

IV. INFORMATION AVAILABLE FROM

01 CONTACT	02 OF (Agency/Organization)	03 TELEPHONE NO.
		( )

04 PERSON RESPONSIBLE FOR SITE INSPECTION FORM	05 AGENCY	06 ORGANIZATION	07 TELEPHONE NO.	08 DATE
Jeff Myers	EPA	NUS Corp.	404-938-7710	12 8 88 (MONTH DAY YEAR)

EPA FORM 2070-13 (7-81)

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 2 - WASTE INFORMATION

EPA

I. IDENTIFICATION

01 STATE: KYD | 02 SITE NUMBER: 042943423

II. WASTE STATES, QUANTITIES, AND CHARACTERISTICS

01 PHYSICAL STATES (Check all that apply)

- ☐ A SOLID
- ☐ B POWDER, FINES
- ☐ C SLUDGE
- ☐ D OTHER _____ (Specify)
- ☐ E SLURRY
- ☒ F LIQUID
- ☐ G GAS

02 WASTE QUANTITY AT SITE (Measures of waste quantities must be independent)

TONS _____

CUBIC YARDS _____

NO. OF DRUMS 250 gallon

03 WASTE CHARACTERISTICS (Check all that apply)

- ☐ A TOXIC
- ☒ B CORROSIVE
- ☐ C RADIOACTIVE
- ☐ D PERSISTENT
- ☐ E SOLUBLE
- ☐ F INFECTIOUS
- ☐ G FLAMMABLE
- ☐ H IGNITABLE
- ☐ I HIGHLY VOLATILE
- ☐ J EXPLOSIVE
- ☐ K REACTIVE
- ☐ L INCOMPATIBLE
- ☐ M NOT APPLICABLE

III. WASTE TYPE

CATEGORY	SUBSTANCE NAME	01 GROSS AMOUNT	02 UNIT OF MEASURE	03 COMMENTS
SLU	SLUDGE			
OLW	OILY WASTE			
SOL	SOLVENTS			
PSD	PESTICIDES			
OCC	OTHER ORGANIC CHEMICALS			
IOC	INORGANIC CHEMICALS			
ACD	ACIDS	250	Gallons	Cresylic Acid
BAS	BASES			
MES	HEAVY METALS			

IV. HAZARDOUS SUBSTANCES (See Appendix for most frequently cited CAS Numbers)

01 CATEGORY	02 SUBSTANCE NAME	03 CAS NUMBER	04 STORAGE/DISPOSAL METHOD	05 CONCENTRATION	06 MEASURE OF CONCENTRATION
	Cresylic Acid				

V. FEEDSTOCKS (See Appendix for CAS Numbers)

CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER	CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER
FDS			FDS		
FDS			FDS		
FDS			FDS		
FDS			FDS		

VI. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

EPA FORM 2070-13(7-81)

EPA

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION
01 STATE: KYD | 02 SITE NUMBER: 04294423

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A. GROUNDWATER CONTAMINATION | 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: [redacted] | 04 NARRATIVE DESCRIPTION

None

01 ☐ B. SURFACE WATER CONTAMINATION | 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ | 04 NARRATIVE DESCRIPTION

None

01 ☐ C. CONTAMINATION OF AIR | 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ | 04 NARRATIVE DESCRIPTION

None

01 ☐ D. FIRE/EXPLOSIVE CONDITIONS | 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ | 04 NARRATIVE DESCRIPTION

None

01 ☐ E. DIRECT CONTACT | 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ | 04 NARRATIVE DESCRIPTION

None

01 ☐ F. CONTAMINATION OF SOIL | 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 AREA POTENTIALLY AFFECTED: _____ (Acres) | 04 NARRATIVE DESCRIPTION

250 gallons of cresylic acid was spilled. It ran down a gulley and into a holding pond.

01 ☐ G. DRINKING WATER CONTAMINATION | 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ | 04 NARRATIVE DESCRIPTION

None

01 ☐ H. WORKER EXPOSURE/INJURY | 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 WORKERS POTENTIALLY AFFECTED: _____ | 04 NARRATIVE DESCRIPTION

None

01 ☐ I. POPULATION EXPOSURE/INJURY | 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ | 04 NARRATIVE DESCRIPTION

None

EPA

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION
01 STATE | 02 SITE NUMBER

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA
04 NARRATIVE DESCRIPTION
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

01 ☐ K. DAMAGE TO FAUNA
04 NARRATIVE DESCRIPTION (include names(s) of species)
02 ☐ OBSERVED (DATE _____) ☐ POTENTIAL ☐ ALLEGED

01 ☐ L. CONTAMINATION OF FOOD CHAIN
04 NARRATIVE DESCRIPTION
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

01 ☐ M. UNSTABLE CONTAINMENT OF WASTES
(Spills/Runoff/Standing liquids/Leaking drums)
03 POPULATION POTENTIALLY AFFECTED: _____
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

01 ☐ N. DAMAGE TO OFFSITE PROPERTY
04 NARRATIVE DESCRIPTION
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs
04 NARRATIVE DESCRIPTION
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING
04 NARRATIVE DESCRIPTION
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

Drums with Anaconda's name on them were found at Dawkins Road Dump site

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

III. TOTAL POPULATION POTENTIALLY AFFECTED: _____

IV. COMMENTS

V. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

EPA

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION
PART 4 - PERMIT AND DESCRIPTIVE INFORMATION

I. IDENTIFICATION

01 STATE	02 SITE NUMBER

II. PERMIT INFORMATION

01 TYPE OF PERMIT ISSUED (Check all that apply)	02 PERMIT NUMBER	03 DATE ISSUED	04 EXPIRATION DATE	05 COMMENTS
☐ A. NPDES				
☐ B. UIC				
☐ C. AIR				
☐ D. RCRA				
☐ E. RCRA INTERIM STATUS				
☐ F. SPCC PLAN				
☐ G. STATE (Specify)				
☐ H. LOCAL (Specify)				
☐ I. OTHER (Specify)				
☐ J. NONE				

III. SITE DESCRIPTION

01 STORAGE/DISPOSAL (Check all that apply)	02 AMOUNT	03 UNIT OF MEASURE
☐ A. SURFACE IMPOUNDMENT		
☐ B. PILES		
☐ C. DRUMS, ABOVE GROUND		
☐ D. TANK, ABOVE GROUND		
☐ E. TANK, BELOW GROUND		
☐ F. LANDFILL		
☐ G. LANDFARM		
☐ H. OPEN DUMP		
☒ I. OTHER (Specify) over flow spill	250	gallons

04 TREATMENT (Check all that apply)

- ☐ A. INCINERATION
- ☐ B. UNDERGROUND INJECTION
- ☐ C. CHEMICAL/PHYSICAL
- ☐ D. BIOLOGICAL
- ☐ E. WASTE OIL PROCESSING
- ☐ F. SOLVENT RECOVERY
- ☐ G. OTHER RECYCLING/RECOVERY
- ☐ H. OTHER (Specify) _____

05 OTHER

- ☐ A. BUILDINGS ON SITE

06 AREA OF SITE

4 (Acres)

07 COMMENTS

IV. CONTAINMENT

01 CONTAINMENT OF WASTES (Check one)

☐ A. ADEQUATE, SECURE ☐ B. MODERATE ☐ C. INADEQUATE, POOR ☐ D. INSECURE, UNSOUND, DANGEROUS

02 DESCRIPTION OF DRUMS, DIKING, LINERS, BARRIERS, ETC.

V. ACCESSIBILITY

01 WASTE EASILY ACCESSIBLE: ☐ YES ☐ NO

02 COMMENTS

VI. SOURCES OF INFORMATION (Cite specific references, e.g. state files, sample analysis, reports)

EPA

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 5 - WATER, DEMOGRAPHIC, AND ENVIRONMENTAL DATA

I. IDENTIFICATION
01 STATE | 02 SITE NUMBER

II. DRINKING WATER SUPPLY

01 TYPE OF DRINKING SUPPLY	SURFACE	WELL	02 STATUS			03 DISTANCE TO SITE
			ENDANGERED	AFFECTED	MONITORED	
COMMUNITY	A. ☐	B. ☒	A. ☐	B. ☐	C. ☐	A. _____ (mi)
NON-COMMUNITY	C. ☐	D. ☐ Springs ☐ Cisterns	D. ☐	E. ☐	F. ☐	B. 2000 Ft. (mi)

III. GROUNDWATER

01 GROUNDWATER USE IN VICINITY

☐ A. ONLY SOURCE FOR DRINKING ☐ B. DRINKING ☐ C. COMMERCIAL, INDUSTRIAL, IRRIGATION ☐ D. NOT USED, UNUSEABLE

COMMERCIAL, INDUSTRIAL, IRRIGATION

02 POPULATION SERVED BY GROUND WATER _____

03 DISTANCE TO NEAREST DRINKING WATER WELL: Cistern 2000 Ft (mi)

04 DEPTH TO GROUNDWATER	05 DIRECTION OF GROUNDWATER FLOW	06 DEPTH TO AQUIFER OF CONCERN	07 POTENTIAL YIELD OF AQUIFER	08 SOLE SOURCE AQUIFER
35 (ft)	_____	_____ (ft)	_____ (gpd)	☐ YES ☐ NO

09 DESCRIPTION OF WELLS (Including casings, depth, and location relative to contamination and buildings)

10 RECHARGE AREA		11 DISCHARGE AREA	
☐ YES ☐ NO	COMMENTS	☐ YES ☐ NO	COMMENTS

IV. SURFACE WATER

01 SURFACE WATER USE (Check one)

☐ A. RESERVOIR, RECREATION DRINKING WATER SOURCE ☐ B. IRRIGATION, ECONOMICALLY IMPORTANT RESOURCES ☐ C. COMMERCIAL, INDUSTRIAL ☐ D. NOT CURRENTLY USED

02 AFFECTED/POTENTIALLY AFFECTED BODIES OF WATER

NAME:	AFFECTED	DISTANCE TO SITE
_____	☐	_____ (mi)
_____	☐	_____ (mi)
_____	☐	_____ (mi)

V. DEMOGRAPHIC AND PROPERTY INFORMATION

01 TOTAL POPULATION WITHIN

ONE (1) MILE OF SITE: A. _____ (NO. OF PERSONS)
TWO (2) MILES OF SITE: B. _____ (NO. OF PERSONS)
THREE (3) MILES OF SITE: C. _____ (NO. OF PERSONS)

02 DISTANCE TO NEAREST POPULATION: _____ (mi)

03 NUMBER OF BUILDINGS WITHIN TWO (2) MILES OF SITE: _____

04 DISTANCE TO NEAREST OFF-SITE BUILDING: _____ (mi)

05 POPULATION WITHIN VICINITY OF SITE (Provide narrative description of nature of population within vicinity of site, e.g., rural, village, densely populated urban area)

EPA

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 5 - WATER, DEMOGRAPHIC, AND ENVIRONMENTAL DATA

I. IDENTIFICATION

01 STATE	02 SITE NUMBER

VI. ENVIRONMENTAL INFORMATION

01 PERMEABILITY OF UNSATURATED ZONE (Check one)

☐ A. 10^{-6} – 10^{-8} cm/sec ☐ B. 10^{-4} – 10^{-6} cm/sec ☒ C. 10^{-4} – 10^{-3} cm/sec ☐ D. GREATER THAN 10^{-3} cm/sec

02 PERMEABILITY OF BEDROCK (Check one)

☐ A. IMPERMEABLE (Less than 10^{-6} cm/sec) ☐ B. RELATIVELY IMPERMEABLE (10^{-4} – 10^{-6} cm/sec) ☒ C. RELATIVELY PERMEABLE (10^{-2} – 10^{-4} cm/sec) ☐ D. VERY PERMEABLE (Greater than 10^{-2} cm/sec)

03 DEPTH TO BEDROCK	04 DEPTH OF CONTAMINATED SOIL ZONE	05 SOIL pH	
_____ (ft)	_____ (ft)	_____	

06 NET PRECIPITATION	07 ONE YEAR 24 HOUR RAINFALL	08 SLOPE SITE SLOPE	DIRECTION OF SITE SLOPE	TERRAIN AVERAGE SLOPE
8 (in)	2.5 (in)	3.2 %		_____ %

09 FLOOD POTENTIAL	10
SITE IS IN _____ YEAR FLOODPLAIN	☐ SITE IS ON BARRIER ISLAND, COASTAL HIGH HAZARD AREA, RIVERINE FLOODWAY

11 DISTANCE TO WETLANDS (5 acre minimum)		12 DISTANCE TO CRITICAL HABITAT (of endangered species)
ESTUARINE	OTHER	_____ (mi)
A. _____ (mi)	B. _____ (mi)	ENDANGERED SPECIES: _____

13 LAND USE IN VICINITY

DISTANCE TO:			
COMMERCIAL/INDUSTRIAL	RESIDENTIAL AREAS; NATIONAL/STATE PARKS, FORESTS, OR WILDLIFE RESERVES	AGRICULTURAL LANDS PRIME AG LAND	AG LAND
A. 1500 ft. (mi)	B. 2000 ft (mi)	C. _____ (mi)	D. _____ (mi)

14 DESCRIPTION OF SITE IN RELATION TO SURROUNDING TOPOGRAPHY

VII. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

EPA FORM 2070-13 (7-81)

EPA

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 6 - SAMPLE AND FIELD INFORMATION

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER

II. SAMPLES TAKEN

SAMPLE TYPE	01 NUMBER OF SAMPLES TAKEN	02 SAMPLES SENT TO	03 ESTIMATED DATE RESULTS AVAILABLE
GROUNDWATER			
SURFACE WATER			
WASTE			
AIR			
RUNOFF			
SPILL			
SOIL			
VEGETATION			
OTHER			

III. FIELD MEASUREMENTS TAKEN

01 TYPE	02 COMMENTS

IV. PHOTOGRAPHS AND MAPS

01 TYPE ☐ GROUND ☐ AERIAL

02 IN CUSTODY OF _____
(Name of organization or individual)

03 MAPS
☐ YES
☐ NO

04 LOCATION OF MAPS _____

V. OTHER FIELD DATA COLLECTED (Provide narrative description)

VI. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

EPA

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 7 - OWNER INFORMATION

I. IDENTIFICATION

01 STATE	02 SITE NUMBER

II. CURRENT OWNER(S)			**PARENT COMPANY** (If applicable)		
01 NAME [redacted]		02 D+B NUMBER	08 NAME		09 D+B NUMBER
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE	10 STREET ADDRESS (P.O. Box, RFD #, etc.)		11 SIC CODE
05 CITY	06 STATE	07 ZIP CODE	12 CITY	13 STATE	14 ZIP CODE
01 NAME		02 D+B NUMBER	08 NAME		09 D+B NUMBER
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE	10 STREET ADDRESS (P.O. Box, RFD #, etc.)		11 SIC CODE
05 CITY	06 STATE	07 ZIP CODE	12 CITY	13 STATE	14 ZIP CODE
01 NAME		02 D+B NUMBER	08 NAME		09 D+B NUMBER
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE	10 STREET ADDRESS (P.O. Box, RFD #, etc.)		11 SIC CODE
05 CITY	06 STATE	07 ZIP CODE	12 CITY	13 STATE	14 ZIP CODE
01 NAME		02 D+B NUMBER	08 NAME		09 D+B NUMBER
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE	10 STREET ADDRESS (P.O. Box, RFD #, etc.)		11 SIC CODE
05 CITY	06 STATE	07 ZIP CODE	12 CITY	13 STATE	14 ZIP CODE
III. PREVIOUS OWNER(S) (List most recent first)			**IV. REALTY OWNER(S)** (If applicable; list most recent first)		
01 NAME		02 D+B NUMBER	01 NAME		02 D+B NUMBER
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE	03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE
05 CITY	06 STATE	07 ZIP CODE	05 CITY	06 STATE	07 ZIP CODE
01 NAME		02 D+B NUMBER	01 NAME		02 D+B NUMBER
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE	03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE
05 CITY	06 STATE	07 ZIP CODE	05 CITY	06 STATE	07 ZIP CODE
01 NAME		02 D+B NUMBER	01 NAME		02 D+B NUMBER
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE	03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE
05 CITY	06 STATE	07 ZIP CODE	05 CITY	06 STATE	07 ZIP CODE

V. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

EPA

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 8 - OPERATOR INFORMATION

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER

II. CURRENT OPERATOR

01 NAME	02 D+B NUMBER	10 NAME	11 D+B NUMBER
03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE	12 STREET ADDRESS (P.O. Box, RFD #, etc.)	13 SIC CODE
05 CITY	06 STATE / 07 ZIP CODE	14 CITY	15 STATE / 16 ZIP CODE
08 YEARS OF OPERATION	09 NAME OF OWNER		

III. PREVIOUS OPERATOR(S) (List most recent first; provide only if different from owner)

01 NAME	02 D+B NUMBER	10 NAME	11 D+B NUMBER
03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE	12 STREET ADDRESS (P.O. Box, RFD #, etc.)	13 SIC CODE
05 CITY	06 STATE / 07 ZIP CODE	14 CITY	15 STATE / 16 ZIP CODE
08 YEARS OF OPERATION	09 NAME OF OWNER DURING THIS PERIOD		
01 NAME	02 D+B NUMBER	10 NAME	11 D+B NUMBER
03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE	12 STREET ADDRESS (P.O. Box, RFD #, etc.)	13 SIC CODE
05 CITY	06 STATE / 07 ZIP CODE	14 CITY	15 STATE / 16 ZIP CODE
08 YEARS OF OPERATION	09 NAME OF OWNER DURING THIS PERIOD		
01 NAME	02 D+B NUMBER	10 NAME	11 D+B NUMBER
03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE	12 STREET ADDRESS (P.O. Box, RFD #, etc.)	13 SIC CODE
05 CITY	06 STATE / 07 ZIP CODE	14 CITY	15 STATE / 16 ZIP CODE
08 YEARS OF OPERATION	09 NAME OF OWNER DURING THIS PERIOD		

IV. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

EPA

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 9 - GENERATOR/TRANSPORTER INFORMATION

I. IDENTIFICATION

01 STATE	02 SITE NUMBER

II. ON-SITE GENERATOR

01 NAME	02 D+B NUMBER
03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE
05 CITY	06 STATE / 07 ZIP CODE

III. OFF-SITE GENERATOR(S)

01 NAME	02 D+B NUMBER	01 NAME	02 D+B NUMBER
03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE	03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE
05 CITY	06 STATE / 07 ZIP CODE	05 CITY	06 STATE / 07 ZIP CODE
01 NAME	02 D+B NUMBER	01 NAME	02 D+B NUMBER
03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE	03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE
05 CITY	06 STATE / 07 ZIP CODE	05 CITY	06 STATE / 07 ZIP CODE

IV. TRANSPORTER(S)

01 NAME	02 D+B NUMBER	01 NAME	02 D+B NUMBER
03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE	03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE
05 CITY	06 STATE / 07 ZIP CODE	05 CITY	06 STATE / 07 ZIP CODE
01 NAME	02 D+B NUMBER	01 NAME	02 D+B NUMBER
03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE	03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE
05 CITY	06 STATE / 07 ZIP CODE	05 CITY	06 STATE / 07 ZIP CODE

V. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

EPA

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 10 - PAST RESPONSE ACTIVITIES

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER

II. PAST RESPONSE ACTIVITIES

01 ☐ A. WATER SUPPLY CLOSED — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ B. TEMPORARY WATER SUPPLY PROVIDED — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ C. PERMANENT WATER SUPPLY PROVIDED — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ D. SPILLED MATERIAL REMOVED — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ E. CONTAMINATED SOIL REMOVED — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ F. WASTE REPACKAGED — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ G. WASTE DISPOSED ELSEWHERE — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ H. ON SITE BURIAL — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ I. IN SITU CHEMICAL TREATMENT — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ J. IN SITU BIOLOGICAL TREATMENT — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ K. IN SITU PHYSICAL TREATMENT — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ L. ENCAPSULATION — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ M. EMERGENCY WASTE TREATMENT — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ N. CUTOFF WALLS — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ O. EMERGENCY DIKING/SURFACE WATER DIVERSION — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ P. CUTOFF TRENCHES/SUMP — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ Q. SUBSURFACE CUTOFF WALL — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

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POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 10 - PAST RESPONSE ACTIVITIES

I. IDENTIFICATION
01 STATE | 02 SITE NUMBER

II PAST RESPONSE ACTIVITIES (Continued)

01 ☐ R. BARRIER WALLS CONSTRUCTED — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ S. CAPPING/COVERING — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ T. BULK TANKAGE REPAIRED — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ U. GROUT CURTAIN CONSTRUCTED — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ V. BOTTOM SEALED — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ W. GAS CONTROL — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ X. FIRE CONTROL — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ Y. LEACHATE TREATMENT — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ Z. AREA EVACUATED — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ 1. ACCESS TO SITE RESTRICTED — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ 2. POPULATION RELOCATED — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ 3. OTHER REMEDIAL ACTIVITIES — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

III. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

EPA

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 11 - ENFORCEMENT INFORMATION

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER

II. ENFORCEMENT INFORMATION

01 PAST REGULATORY ENFORCEMENT ACTION ☐ YES ☐ NO

02 DESCRIPTION OF FEDERAL, STATE, LOCAL REGULATORY/ENFORCEMENT ACTION

III. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

General Information

The Potential Hazardous Waste Site, Site Inspection Report form is used to record information collected during, or associated with, an inspection of the site and other information about responsible parties and past response activities.

The Site Inspection Report form contains eleven parts:

Part 1 – Site Location and Inspection Information

Part 2 – Waste Information

Part 3 – Description of Hazardous Conditions and Incidents

Part 4 – Permit and Descriptive Information

Part 5 – Water, Demographic, and Environmental Data

Part 6 – Sample and Field Information

Part 7 – Owner Information

Part 8 – Operator Information

Part 9 – Generator/Transporter Information

Part 10 – Past Response Activities

Part 11 – Enforcement Information

Part 1 – Site Location and Inspection Information contains all of the data elements also contained on the Site Identification and Preliminary Assessment forms required to add a site to the automated Site Tracking System (STS). It is therefore possible to add a site to STS at the Site Inspection stage. Instructions are given below.

Part 2 – Waste Information and Part 3 – Description of Hazardous Conditions and Incidents are used to record specific information about substances, amounts, hazards, and targets, e.g., population potentially affected. Parts 2 and 3 are also contained in the Potential Hazardous Waste Site, Preliminary Assessment form. Information recorded on Part 2 and Part 3 during a preliminary assessment may be updated, added, deleted, or corrected on the Site Inspection Report form.

An Appendix with feedstock names and CAS Numbers and the most frequently cited hazardous substances and CAS Numbers is located behind the instructions for the Site Inspection Report.

A number of the data items collected throughout the Site Inspection Report support the Site Ranking Model. The majority of these data items are found in Part 5 – Water, Demographic, and Environmental Data.

General Instructions

1. Complete the Site Inspection Report form as completely as possible.

2. Starred items (*) are required before inspection information can be added to STS. The system will not accept incomplete inspection information.

3. To add a site to STS at the Site Inspection stage, write "New" across the top of the form and complete items II-01, 02, 03, 04, and 06, Site Name and Location, II-09 Coordinates, and II-10, Type of Ownership.

4. Data items carried in STS, which are identical to those on the Site Identification and Preliminary Assessment forms and which can be added, deleted, or changed using the Site Inspection Report form, are indicated with a pound sign (#). To ensure that the proper action is taken, outline the item(s) to be added, deleted, or changed with a bright color and indicate the proper action with "A" (add), "D" (delete) or "C" (change).

5. There are two options available for adding, deleting, or changing information supplied on the Site Inspection Report form. The first is to use a new Site Inspection Report form, completing only those items to be added, deleted, or changed. Mark the form clearly, using "A", "D" or "C" to indicate the action to be taken. If only data in STS are to be altered, the Site Source Data Report may be used. Using the report, mark clearly the items to be changed and the action to be taken.

Detailed Instructions

Part 1 Site Location and Inspection Information

I. Identification: Identification (State and Site Number) is the site record key, or primary identifier, for the site. Site records in the STS are updated based on identification. It is essential that State and Site Number are correctly entered on each form.

***I-01 State:** Enter the two character alpha FIPS code for the state in which the site is located. It must be identical to State on the Site Identification form.

***I-02 Site Number:** Enter the ten character alphanumeric code for sites which have a Dun and Bradstreet or EPA "user" Dun and Bradstreet number or the ten character numeric GSA identification code for federal sites. The Site Number must be identical to the Site Number on the Site Identification and Preliminary Assessment forms.

II. Site Name and Location: If Site Name and Location information require no additions or changes, these items are not required on the Site Inspection Report form. However, completing these items will facilitate use of the completed form and records management procedures.

#II-01 Site Name: Enter the legal, common, or descriptive name of the site.

#II-02 Site Street: Enter the street address and number (if appropriate) where the site is located. If the precise street address is unavailable for this site, enter brief direction identifier, e.g., NW Jct I-295 & US 99; Post Rd, 5 mi W of Rt. 5.

#II-03 Site City: Enter the city, town, village, or other municipality in which the site is located. If the site is not located in a municipality, enter the name of the municipality (or place) which is nearest the site or which most easily locates the site.

#II-04 Site State: Enter the two character alpha FIPS code for the state in which the site is located. The code must be the same as in item I-01.

#II-06 Site Zip Code: Enter the five character numeric ZIP code for the postal zone in which the site is located.

*II-06 Site County: Enter the name of the county, parish (Louisiana), or borough (Alaska) in which the site is located.

*II-07 County Code: Enter the three character numeric FIPS county code for the county, parish, or borough in which the site is located. (The regional data analyst can furnish this data item.)

*II-08 Site Congressional District: Enter the two character number for the congressional district in which the site is located.

*II-09 Coordinates: Enter the Coordinates, Latitude and Longitude, of the site in degrees, minutes, seconds, and tenths of seconds. If a tenth of a second is insignificant at this site, enter "0" in the tenths position.

*II-10 Type of Ownership: Check the appropriate box to indicate the type of site ownership. If the site is under the jurisdiction of an activity of the federal government, enter the name of the department, agency, or activity. If Other is indicated, specify the type of ownership and name.

III. Inspection Information

*III-01 Date of Inspection: Enter the date the inspection occurred, or began for multiple day inspections.

*III-02 Site Status: Check the appropriate box(es) to indicate the current status of the site. Active sites are those which treat, store, or dispose of wastes. Check Active for those active sites with an inactive storage or disposal area. Inactive sites are those at which treatment, storage, or disposal activities no longer occur.

*III-03 Years of Operation: Enter the beginning and ending years (or beginning only if operations at the site are on-going), e.g., 1972/1982, of site operation. Check Unknown if years of operation are not known.

*III-04 Agency Performing Inspection: Check the appropriate box(es) to indicate parties participating in the inspection. If contractors participate, provide the name of the firm(s).

III-05 Chief Inspector: Enter the name of the chief, or lead inspector.

III-06 Title: Enter the Chief Inspector's title, e.g., Team Leader, FIT team.

III-07 Organization: Enter the name of the organization where the Chief Inspector is employed, e.g., EPA – Region 4, VA State Health Dept., Environmental Research Co.

III-08 Telephone Number: Enter the Chief Inspector's area code and local commercial telephone number.

III-09 Other Inspectors: Enter the names of other parties participating in the inspection.

III-10 Title: Enter the titles of other parties participating in the inspection.

III-11 Organization: Enter the names of the organizations where other parties participating in the inspection are employed.

III-12 Telephone Number: Enter the area code and local commercial telephone numbers of other parties participating in the inspection.

III-13 Site Representatives Interviewed: Enter the names of individuals representing responsible parties interviewed in connection with the inspection. Interviews do not necessarily occur during the inspection.

III-14 Title: Enter the titles of the individuals interviewed.

III-15 Address: Enter the business, mailing, or residential addresses of the individuals interviewed.

III-16 Telephone Number: Enter the area code and local commercial telephone numbers of the individuals interviewed.

III-17 Access Gained By: Check the appropriate box to indicate whether access to the site was gained through permission or warrant.

III-18 Time of Inspection: Using a 24-hour clock, enter the time the inspection began, e.g., for 3:24 p.m. enter 1524.

III-19 Weather Conditions: Describe the weather conditions during the site inspection, especially any unusual conditions which might affect results or observations taken.

IV. Information Available From

IV-01 Contact: Enter the name of the individual who can provide information about the site.

IV-02 Of: If appropriate, enter the name of the public or private agency, firm, or company and the organization within the agency, firm, or company of the individual named as Contact.

IV-03 Telephone Number: Enter the area code and local telephone number of the individual named as contact.

IV-04 Person Responsible for Site Inspection Report Form: Enter the name of the individual who was responsible for the information entered on the Site Inspection Report form. The person responsible for the Site Inspection Report form may be different from the individual who prepared the form.

IV-05 Agency: Enter the name of the Agency where the individual who is responsible for the Site Inspection Report form is employed.

IV-06 Organization: Enter the name of the organization within the Agency.

IV-07 Telephone Number: Enter the area code and local telephone number of the individual who is responsible for the Site Inspection Report form.

IV-08 Date: Enter the date the Site Inspection Report form was prepared.

Part 2 Waste Information

*I. Identification: Refer to Part 1–I.

II. Waste States, Quantities, and Characteristics: Waste States, Quantities, and Characteristics provide information about the physical structure and form of the waste, measures of gross amounts at the site, and the hazards posed by the waste, considering acute and chronic health effects and mobility along a pathway.

*II-01 Physical States: Check the appropriate box(es) to indicate the state(s) of waste present at the site. If Other is indicated, specify the physical state of the waste.

*II-02 Waste Quantity at Site: Enter estimates of amounts of waste at the site. Estimates may be in weight (Tons) or volume (Cubic Yards or Number of Drums). Use as many entries as are appropriate; however, measurements must be independent. For example, do not measure the same amounts of waste as both tons and cubic yards.

*II-03 Waste Characteristics: Check all appropriate entries to indicate the hazards posed by waste at the site. If waste at the site poses no hazard, check Not Applicable.

III. **Waste Category**: General categories of waste typically found are listed here. Enter the estimated gross amount of each category of waste and the appropriate unit of measure.

*III-01 Gross Amount: Gross Amount is the estimate of the amount of the waste category found at the site. Estimates should be furnished in metric tons (MT), tons (TN), cubic meters (CM), cubic yards (CY), drums (DR), acres (AC), acre feet (AF), liters (LT), or gallons (GA). Enter the estimated amount next to the appropriate waste category.

*III-02 Unit of Measure: Enter the appropriate unit of measure, MT (metric tons), TN (tons), CM (cubic meters), CY (cubic yards), DR (number of drums), AC (acres), AF (acre feet), LT (liters), or GA (gallons) next to the estimate of gross amount.

III-03 Comments: Comments may be used to further explain, or provide additional information, about particular waste categories.

IV. **Hazardous Substances**: Specific hazardous, or potentially hazardous, chemicals, mixtures, and substances found at the site are listed here. For each substance listed those data items marked with an "at" sign (@) must be included.

@IV-01 Category: Enter in front of the substance name the three character waste category from Section III which best describes the substance, e.g., OLW (Oily Waste).

@IV-02 Substance Name: Enter one of the following: the name of the substance registered with the Chemical Abstract Service, the common or accepted abbreviation of the substance, the generic name of the substance, or commercial name of the substance.

@IV-03 CAS Number: Enter the number assigned to the substance when it was registered with the Chemical Abstract Service. Refer to the Appendix for most frequently cited CAS Numbers. CAS Numbers must be furnished for each substance listed. If a CAS Number for this substance has not been assigned, enter "999".

@IV-04 Storage/Disposal Method: Enter the type of storage or disposal facility in which the substance was found: SI (surface impoundment, including pits, ponds, and lagoons), PL (pile), DR (drum), TK (tank), LF (landfill), LM (landfarm), OD (open dump).

IV-05 Concentration: Enter the concentration of the substance found in samples taken at the site.

IV-06 Measure of Concentration: Enter the appropriate unit of measure for the measured concentration of the substance found in the sample, e.g., MG - UG/L.

V. **Feedstocks**

V-01 Feedstock Name: If feedstocks, or substances derived from one or more feedstocks, are present at the site, enter the name of each feedstock found. See the Appendix for the feedstock list.

V-02 CAS Number: Enter the CAS Number for each feedstock named. See the Appendix for feedstock CAS Numbers.

VI. **Sources of Information**: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

Part 3 Description of Hazardous Conditions and Incidents

*I. **Identification**: Refer to Part 1—I.

II. **Hazardous Conditions and Incidents:**

II-01 Hazards: Indicate each hazardous, or potentially hazardous, condition known, or claimed, to exist at the site.

II-02 Observed, Potential, or Alleged: Check Observed and enter the date, or approximate date, of occurrence if a release of contaminants to the environment, or some other hazardous incident, is known to have occurred. In case of a continuing release, e.g., groundwater contamination, enter the date, or approximate date, the condition first became apparent. If conditions exist for a potential release, check potential. Check Alleged for hazardous, or potentially hazardous, conditions claimed to exist at the site.

II-03 Population Potentially Affected: For each hazardous condition at the site, enter the number of people potentially affected. For Soil enter the number of acres potentially affected.

II-04 Narrative Description: Provide a narrative description, or explanation, of each condition. Include any additional information which further explains the condition.

II-05 Description of Any Other Known, Potential, or Alleged Hazards: Provide a narrative description of any other hazardous, or potentially hazardous, conditions at the site not covered above.

III. **Total Population Potentially Affected**: Enter the total number of people potentially affected by the existence of hazardous, or potentially hazardous, conditions at the site. Do not sum the numbers shown for each condition.

IV. **Comments**: Other information relevant to observed, potential, or alleged hazards may be entered here.

Sources of Information: List the sources used to obtain information for this form. Sources cited may include sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

Part 4 Permit and Descriptive Information

*I. **Identification**: Refer to Part 1–I.

II. **Permit Information**

II-01 Type of Permit Issued: Check the appropriate box(es) to indicate the types of permits issued to the site. If state, local, or other types of environmental permits have been issued, specify the type.

II-02 Permit Number: Enter the permit number for each issued permit.

II-03 Date Issued: Enter the date each permit was issued.

II-04 Expiration Date: Enter the date each permit expires or expired.

II-05 Comments: Enter any information which further explains the types of permits issued or status of the permits.

III. **Site Description**

*III-01 Storage/Disposal: Check the appropriate box(es) to indicate the types of storage/disposal facilities found at the site. If Other is checked, specify the type of facility.

*III-02 Amount: Enter the gross amount of waste associated with each type of storage/disposal facility. Amounts may be measured in: metric tons, tons, cubic meters, cubic yards, drums, acres, acre feet, liters, or gallons.

*III-03 Unit of Measure: Enter the appropriate unit of measure for each entry. Units of measure are MT (metric tons), TN (tons), CM (cubic meters), CY (cubic yards), DR (drums), AC (acres), AF (acre feet), LT (liters), or GA (gallons).

*III-04 Treatment: If waste is treated at the site, check the appropriated box(es) to indicate treatment methods used. If Other is checked, specify treatment method.

III-05 Other: If there are buildings on site, check this box.

*III-06 Area of Site: Enter total area of site in acres.

III-07 Comments: Enter any other pertinent information.

IV. **Containment**: Containment is a measure of the natural or artificial means taken to minimize or preclude health hazards and to minimize or prevent contamination of the environment from waste at the site.

*IV-01 Containment of Wastes: Check the appropriate box to indicate the condition of containment measures at the site. When choosing the appropriate box, consider the potential for environmental contamination, i.e., the worst case for containment in conjunction with the most hazardous substances.

IV-02 Description of Drums, Diking, Liners, Barriers: Provide a narrative description of the condition of containment measures at the site, e.g., waste adequately contained, drums rusting and leaking, diking collapsing, liners leaking and contaminants leaching into soil and groundwater.

V. **Accessibility**: Accessibility is an indicator of the potential for direct contact with hazardous substances.

*V-01 Waste Easily Accessible: If there are no real barriers preventing human access to hazardous waste, check Yes, otherwise check No.

V-02 Comments: Additional information about accessibility to hazardous waste may be provided.

VI. **Sources of Information**: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

Part 5 Water, Demographic, and Environmental Data

*I. **Identification**: Refer to Part 1–I.

II. **Drinking Water Supply**

II-01 Type of Drinking Water Supply: Check the appropriate box(es) to indicate the types and sources of drinking water within the vicinity of the site. Community refers to municipal sources. Non-community refers to private sources, e.g., private wells.

II-02 Status: Check the appropriate box(es) to indicate whether the water supply is endangered or affected by contaminants from the site. Check the appropriate box to indicate if the water supply is being monitored for possible contamination.

II-03 Distance to Site: Enter the distance in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required) from the site to nearest drinking water source.

III. **Groundwater**

III-01 Groundwater Use in Vicinity: Check the appropriate box to indicate groundwater use in the vicinity of the site. The concern is to indicate the seriousness of groundwater contamination from waste at the site. Only Source for Drinking indicates that current water sources are limited to wells in the vicinity of the site. Drinking; Commercial, Industrial, Irrigation indicates that groundwater is used for drinking, but that other limited drinking sources are available and that no other sources for these additional uses are available. Commercial, Industrial, Irrigation indicates that groundwater is used for these purposes, but that limited other sources of water are available. Not used, Unusable indicates that groundwater use in the area is not critical.

III-02 Population Served by Groundwater: Enter the number of people served by groundwater in the vicinity of the site. Population for the purposes of the Site Inspection Report includes residents and daytime workers and students but excludes transients in the neighborhood or on local highways and roads. When estimating population from aerial photographs or other sources, the conversion factor is 3.8 persons for each dwelling unit or 3 persons per acre in rural areas.

III-03 Distance to Nearest Drinking Water Well: Enter the distance in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required) from the site to the nearest drinking water well.

III-04 Depth to Groundwater: Enter the depth in feet to groundwater.

III-05 Depth of Groundwater Flow: Enter the cardinal direction of groundwater flow, e.g., NNW.

III-06 Depth to Aquifer of Concern: Enter the depth in feet to the aquifer of concern.

III-07 Potential Yield of Aquifer: Enter the potential yield of the aquifer in gallons per day.

III-08 Sole Source Aquifer: Check the appropriate box to indicate the aquifer of concern is, or is not, a sole source aquifer.

III-09 Description of Wells: Provide a narrative description of wells in the vicinity of the site, including useage, depth, and location relative to population and buildings.

III-10 Recharge Area: Check the appropriate box to indicate the site is located in a recharge area. Comments provide additional information on the recharge area.

III-11 Discharge Area: Check the appropriate box to indicate the site is located in a discharge area. Comments provide additional information on the discharge area.

IV. Surface Water

IV-01 Surface Water Use: Check the appropriate box to indicate surface water use in the vicinity of the site. The order of precedence is Reservoir, Recreation, Drinking Water Source; Irrigation, Economically Important Reserves; Commercial/Industrial; Not Currently Used.

IV-02 Affected/Potentially Affected Bodies of Water: Enter the names of bodies of surface water affected, or potentially affected, by contaminants from the site. List the body of surface water nearest the site first. For each body of water check Affected if contaminants have been identified in samples of the water. Enter the shortest distance from the body of water to the site in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required).

V. Demographic and Property Information

V-01 Total Population Within: Enter the total population within one (1) mile, two (2) miles, and three (3) miles of the site. Distances are measured from site boundaries. Population for the purposes of the Site Inspection Report includes residents and daytime workers and students but excludes transients in the neighborhood or on local highways and roads. When estimating population from aerial photographs or other sources, the conversion factor is 3.5 persons for each dwelling unit or 3 persons per acre in rural areas.

V-02 Distance to Nearest Population: Enter in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required) the distance from the site boundary to the nearest population (one person minimum).

V-03 Number of Buildings Within Two (2) Miles of Site: Enter the number of buildings within two miles from the boundaries of the site.

V-04 Distance to Nearest Off-Site Building: Enter the distance in miles to the nearest tenth, hundredth or thousandth (as needed to indicate the precision required) from the site boundary to the nearest off-site building.

V-05 Population in Vicinity of Site: Provide a narrative description of the nature of the population within the vicinity of the site. Examples include rural area, small truck farms, urban industrial area, densely populated urban residential area.

VI. Environmental Information

VI-01 Permeability of Unsaturated Zone: Check the appropriate box to indicate the permeability of the earth material above the water table in the vicinity of the site.

VI-02 Permeability of Bedrock: Check the appropriate box to indicate the permeability of the bedrock in the vicinity of the site.

VI-03 Depth to Bedrock: Enter the depth to bedrock in feet.

VI-04 Depth of Contaminated Soil Zone: Enter the depth of the contaminated soil zone in feet.

VI-05 Soil pH: Enter the pH of the soil in the vicinity of the site.

VI-06 Net Precipitation: Enter net precipitation in inches. If net precipitation is not known, subtract the average evaporation figure on the U.S. National Weather Service map showing average annual evaporation in inches from the U.S. Environmental Data Service map showing mean annual precipitation.

VI-07 One Year 24 Hour Rainfall: Enter in inches the figure for one year 24 hour rainfall.

VI-08 Slope: Enter the percentage of site slope, the direction of site slope, and the percentage of the surrounding terrain average slope.

VI-09 Flood Potential: Enter the boundary year for the floodplain in which the site is located. Sites flooded annually are in a 1 (one) year floodplain. Other examples include 10, 20, 50, 100, 500, etc., indicating the probability of flooding within that time period.

VI-10 Site is on Barrier Island, Coastal High Hazard Area, Riverine Floodway: If site is located in one of these areas, check this box.

VI-11 Distance to Wetlands: If applicable, enter the distance in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required) from the site to the closest wetlands (five acre minimum) for Estuarine and Other types of wetlands.

VI-12 Distance to Critical Habitat: If applicable, enter the distance in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required) from the site to the nearest critical habitat

of an endangered species. Enter the name(s) of the endangered species.

VI-13 Land Use in Vicinity: Enter the distance in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required) to the nearest Commercial/Industrial area; Residential Area, National/State Parks, Forests, or Wildlife Reserves; or Agricultural Lands, Prime Ag Land and Ag Land. Prime Ag Land is that crop, pasture, range, or forest land which produces the highest yield in relation to inputs. Ag Land is the remaining agricultural land, frequently considered marginal.

VI-14 Description of Site in Relation to Surrounding Topography: Provide a narrative description of significant or unusual aspects of the surrounding topography in relation to the site. Examples might include: site is in a valley surrounded on all sides by mountains, site is at edge of a river or stream which floods frequently, etc.

VII. **Sources of Information**: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

Part 6 Sample and Field Information

*I. **Identification**: Refer to Part 1—I.

II. **Samples Taken**

II-01 Number of Samples Taken: Next to each sample type enter the number of samples of that type taken.

II-02 Samples Sent To: Enter the name of the laboratory or other facility where the samples were sent for analysis.

II-03 Estimated Date Results Available: Enter the estimated date the results are expected to be available.

III. **Field Measurements Taken**

III-01 Type: Enter the type, e.g., radioactivity, explosivity, organic vapor or gas detection and analysis, reagent type gas detection, of each field measurement taken.

III-02 Comments: Describe results of field measurements, whether they were taken on or off site, and if applicable, the type of disposal facility tested, e.g., drum, surface impoundment, landfill.

IV. **Photographs and Maps**

IV-01 Type: If photographs of the site have been taken, check the appropriate box(es) to indicate the type.

IV-02 In Custody Of: Enter the name of the organization or person who has custody of the photographs.

IV-03 Maps: Check the appropriate box to indicate that maps of the site area have been prepared or obtained.

IV-04 Location of Maps: If site maps are available, indicate their location, e.g., Region 1 Air and Hazardous Materials Division.

V. **Other Field Data Collected**: Provide a narrative description of any other field data collected.

VI. **Sources of Information**: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

Part 7 Owner Information

*I. **Identification**: Refer to Part 1—I.

II. **Current Owner(s) — Parent Company**: Current owner(s) and parent companies, for those owners which are companies partly or wholly owned by another company, provide locator information about responsible parties. Each Part 7 provides space for four (4) current owners and their respective parent companies. If additional space is required, complete another Part 7.

II-01 Name: Enter the legal name of the owner of the site. The owner may be a firm, government agency, association, individual, etc.

II-02 D&B Number: Where available, enter the owner's D&B (Dun and Bradstreet) number. If the current owner is a federal agency, enter the GSA identification code.

II-03 Street Address: Enter the business, mailing, or residential street address of the owner.

II-04 SIC Code: If applicable, enter the owner's primary SIC Code.

II-05 City: Enter the city of the owner's business, mailing, or residential address.

II-06 State: Enter the two character alpha FIPS code for the state of the owner's business, mailing, or residential address.

II-07 Zip Code: Enter the five digit zip code for the owner's business, mailing, or residential address.

II-08 Name: If the owner is a partly or wholly owned subsidiary of another company, enter the legal name of the owner's parent company.

II-09 D&B Number: Enter the parent company's Dun and Bradstreet number.

II-10 Street Address: Enter the business or mailing street address of the parent company.

II-11 SIC Code: If applicable, enter the parent company's primary SIC code.

II-12 City: Enter the city of the parent company's business or mailing address.

II-13 State: Enter the two character alpha FIPS code for the state of the parent company's business or mailing address.

II-14 Zip Code: Enter the five digit zip code for the parent company's business or mailing address.

III. **Previous Owner(s)**: List previous owners in reverse chronological order, i.e., most recent first. If additional space is required, complete another Part 7.

III-01 Name: Enter the legal name of the previous owner. The previous owner may have been a firm, government agency, association, individual, etc.

II-02 D&B Number: Enter the previous owner's Dun and Bradstreet number if available. If the previous owner was a federal agency, enter the GSA identification code if available.

III-03 Street Address: Enter the business, mailing, or residential street address of the previous owner.

III-04 SIC Code: If applicable, enter the primary SIC Code of the previous owner.

III-05 City: Enter the city of the previous owner's business, mailing, or residential address.

III-06 State: Enter the two character alpha FIPS code for the state of the previous owner's business, mailing, or residential address.

III-07 Zip Code: Enter the zip code of the previous owner's business, mailing, or residential address.

IV. **Realty Owner(s):** Realty owner applies when the owner leased to another entity property which was used for the storage or disposal of hazardous waste. List current or most recent first.

IV-01 Name: Enter the legal name of the realty owner. The realty owner may be a firm, government agency, association, individual, etc.

IV-02 D&B Number: Enter the previous owner's Dun and Bradstreet number if available. If the previous owner was a federal agency, enter the GSA identification code if available.

IV-03 Street Address: Enter the realty owner's business, mailing, or residential street address.

IV-04 SIC Code: If applicable, enter the realty owner's primary SIC Code.

IV-05 City: Enter the city of the realty owner's business, mailing, or residential address.

IV-06 State: Enter the two character alpha FIPS code for the state of the realty owner's business, mailing, or residential address.

IV-07 Zip Code: Enter the zip code of the realty owner's business, mailing, or residential address.

V. **Sources of Information:** List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

Part 8 Operator Information

*I. **Identification:** Refer to Part 1—I.

II. **Current Operator—Operator's Parent Company:** Information on operators is applicable when the operator is not the owner.

II-01 Name: Enter the legal name of the operator. The operator may be a firm, government agency, association, individual, etc.

II-02 D&B Number: Enter the operator's Dun and Bradstreet number if available. If the operator is a federal agency, enter the GSA identification code if available.

II-03 Street Address: Enter the operator's business, mailing, or residential street address.

II-04 SIC Code: If applicable, enter the operator's primary SIC Code.

II-05 City: Enter the city of the operator's business, mailing, or residential address.

II-06 State: Enter the two character alpha FIPS code for the state of the operator's business, mailing, or residential address.

II-07 Zip Code: Enter the zip code of the operator's business, mailing, or residential address.

II-08 Years of Operation: Enter the beginning and ending years (or beginning only if operations are on-going), e.g., 1932/1948, of operation at the site.

II-09 Name of Owner: Enter the name of the owner for the period cited for this operator.

II-10 Name: If applicable, enter the legal name of the operator's parent company.

II-11 D&B Number: Enter the operator's parent company Dun and Bradstreet number if available.

II-12 Street Address: Enter the operator's parent company business, mailing, or residential street address.

II-13 SIC Code: If applicable, enter the operator's parent company primary SIC Code.

II-14 City: Enter the city of the operator's parent company business, mailing, or residential address.

II-15 State: Enter the two character alpha FIPS code for the state of the operator's parent company business, mailing, or residential address.

II-16 Zip Code: Enter the zip code of the operator's parent company business, mailing, or residential address.

III. **Previous Operator(s)—Previous Operators' Parent Companies**

III-01 Name: Enter the legal name of the previous operator. The previous operator may be a firm, government agency, association, individual, etc.

III-02 D&B Number: Enter the previous operator's Dun and Bradstreet number if available. If the previous operator was a federal agency, enter the GSA identification code if available.

III-03 Street Address: Enter the previous operator's business, mailing, or residential street address.

III-04 SIC Code: If applicable, enter the previous operator's primary SIC Code.

III-05 City: Enter the city of the previous operator's business, mailing, or residential address.

III-06 State: Enter the two character alpha FIPS code for the state of the previous operator's business, mailing, or residential address.

III-07 Zip Code: Enter the zip code of the previous operator's business, mailing, or residential address.

III-08 Years of Operation: Enter the beginning and ending years of operation for this operator at the site.

III-09 Name of Owner: Enter the name of the owner for the period cited for this operator.

III-10 Name: If applicable, enter the legal name of the previous operator's parent company.

III-11 D&B Number: Enter the previous operator's parent company Dun and Bradstreet number if available.

III-12 Street Address: Enter the previous operator's parent company business, mailing, or residential street address.

III-13 SIC Code: If applicable, enter the previous operator's parent company primary SIC Code.

III-14 City: Enter the city of the previous operator's parent company business, mailing, or residential address.

III-15 State: Enter the two character alpha FIPS code for the state of the previous operator's parent company business, mailing, or residential address.

III-16 Zip Code: Enter the zip code of the previous operator's parent company business, mailing, or residential address.

IV. **Sources of Information:** List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

Part 9 Generator/Transporter Information

*I. **Identification:** Refer to Part 1–I.

II. **On-Site Generator:** A company or agency, located within the contiguous area of the site and generating waste disposed on the site, is entered here.

II-01 **Name:** If there is an on-site generator, enter the legal name of the on-site generator. The on-site generator may be a firm or government agency.

II-02 **D&B Number:** Where available, enter the on-site generator's D&B (Dun and Bradstreet) number. If the on-site generator is a federal agency, enter the GSA identification code.

II-03 **Street Address:** Enter the business or mailing street address of the on-site generator.

II-04 **SIC Code:** If applicable, enter the on-site generator's primary SIC Code.

II-05 **City:** Enter the city of the on-site generator's business or mailing address.

II-06 **State:** Enter the two character alpha FIPS code for the state of the on-site generator's business or mailing address.

II-07 **Zip Code:** Enter the five digit zip code for the on-site generator's business or mailing address.

III. **Off-Site Generator(s):** Those companies or agencies off-site who have generated waste which has been disposed at the site are listed here.

III-01 **Name:** Enter the legal name of the off-site generator. The off-site generator may be a firm or government agency.

III-02 **D&B Number:** Where available, enter the off-site generator's D&B (Dun and Bradstreet) number. If the off-site generator is a federal agency, enter the GSA identification code.

III-03 **Street Address:** Enter the business or mailing street address of the off-site generator.

III-04 **SIC Code:** If applicable, enter the off-site generator's primary SIC Code.

III-05 **City:** Enter the city of the off-site generator's business or mailing address.

III-06 **State:** Enter the two character alpha FIPS code for the state of the off-site generator's business or mailing address.

III-07 **Zip Code:** Enter the five digit zip code for the off-site generator's business or mailing address.

IV. **Transporter(s):** Those carriers who are known to have transported waste to the site are listed here.

IV-01 **Name:** Enter the legal name of the transporter. The transporter may be a firm, government agency, association, individual, etc.

IV-02 **D&B Number:** Where available, enter the transporter's D&B (Dun and Bradstreet) number. If the transporter is a federal agency, enter the GSA identification code.

IV-03 **Street Address:** Enter the business, mailing, or residential street address of the transporter.

IV-04 **SIC Code:** If applicable, enter the transporter's primary SIC Code.

IV-05 **City:** Enter the city of the transporter's business, mailing, or residential address.

IV-06 **State:** Enter the two character alpha FIPS code for the state of the transporter's business, mailing, or residential address.

IV-07 **Zip Code:** Enter the five digit zip code for the transporter's business, mailing, or residential address.

V. **Sources of Information:** List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

Part 10 Past Response Activities

*I. **Identification:** Refer to Part 1–I.

II. **Past Response Activities**

II-01 **Past Response Activities:** Check the appropriate box(es) to indicate response activities initiated prior to the passage of CERCLA, December, 1980.

II-02 **Date:** Enter the start date (or approximate date) of the activity.

II-03 **Agency:** Enter the name of the Agency responsible for the activity.

II-04 **Description:** Provide a brief narrative description of the activity.

III. **Sources of Information:** List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

Part 11 Enforcement Information

*I. Identification. Refer to Part 1–I.

II. **Enforcement Information**

II-01 **Past Regulatory Enforcement Action:** Check the appropriate box to indicate past regulatory or enforcement action at the federal, state, or local level related to this site.

II-02 **Description of Federal, State, Local Regulatory or Enforcement Action:** Provide a narrative description of regulatory or enforcement action to date. Do not include any enforcement action contemplated in the process of development.

III. **Sources of Information:** List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

APPENDIX

I. FEEDSTOCKS

CAS Number	Chemical Name
1. 7664-41-7	Ammonia
2. 7440-36-0	Antimony
3. 1309-64-4	Antimony Trioxide
4. 7440-38-2	Arsenic
5. 1327-53-3	Arsenic Trioxide
6. 21109-95-5	Barium Sulfide
7. 7726-95-6	Bromine
8. 106-99-0	Butadiene
9. 7440-43-9	Cadmium
10. 7782-50-5	Chlorine
11. 12737-27-8	Chromite
12. 7440-47-3	Chromium
13. 7440-48-4	Cobalt
14. 1317-38-0	Cupric Oxide
15. 7758-98-7	Cupric Sulfate
16. 1317-39-1	Cuprous Oxide
17. 74-85-1	Ethylene
18. 7647-01-0	Hydrochloric Acid
19. 7664-39-3	Hydrogen Fluoride
20. 1336-26-7	Lead Oxide
21. 7439-97-6	Mercury
22. 74-82-8	Methane
23. 91-20-3	Naphthalene
24. 7440-02-0	Nickel
25. 7697-37-2	Nitric Acid
26. 7723-14-0	Phosphorus
27. 7778-50-9	Potassium Dichromate
28. 1310-58-3	Potassium Hydroxide
29. 115-07-1	Propylene
30. 10588-01-9	Sodium Dichromate
31. 1310-73-2	Sodium Hydroxide
32. 7646-78-8	Stannic Chloride
33. 7772-99-8	Stannous Chloride
34. 7664-93-9	Sulfuric Acid
35. 108-88-3	Toluene
36. 1330-20-7	Xylene
37. 7646-85-7	Zinc Chloride
38. 7733-02-0	Zinc Sulfate

II. HAZARDOUS SUBSTANCES

CAS Number	Chemical Name
1. 75-07-0	Acetaldehyde
2. 64-19-7	Acetic Acid
3. 108-24-7	Acetic Anhydride
4. 75-86-5	Acetone Cyanohydrin
5. 506-96-7	Acetyl Bromide
6. 75-36-5	Acetyl Chloride
7. 107-02-8	Acrolein
8. 107-13-1	Acrylonitrile
9. 124-04-9	Adipic Acid
10. 309-00-2	Aldrin
11. 10043-01-3	Aluminum Sulfate
12. 107-18-6	Allyl Alcohol
13. 107-05-1	Allyl Chloride
14. 7664-41-7	Ammonia
15. 631-61-8	Ammonium Acetate
16. 1863-63-4	Ammonium Benzoate
17. 1066-33-7	Ammonium Bicarbonate
18. 7789-09-5	Ammonium Bichromate
19. 1341-49-7	Ammonium Bifluoride
20. 10192-30-0	Ammonium Bisulfite
21. 1111-78-0	Ammonium Carbamate
22. 12125-02-9	Ammonium Chloride
23. 7788-98-9	Ammonium Chromate
24. 3012-65-5	Ammonium Citrate, Dibasic
25. 13826-83-0	Ammonium Fluoborate
26. 12125-01-8	Ammonium Fluoride
27. 1336-21-6	Ammonium Hydroxide
28. 6009-70-7	Ammonium Oxalate
29. 16919-19-0	Ammonium Silicofluoride
30. 7773-06-0	Ammonium Sulfamate
31. 12135-76-1	Ammonium Sulfide
32. 10196-04-0	Ammonium Sulfite
33. 14307-43-8	Ammonium Tartrate
34. 1762-95-4	Ammonium Thiocyanate
35. 7783-18-8	Ammonium Thiosulfate
36. 628-63-7	Amyl Acetate
37. 62-53-3	Aniline
38. 7647-18-9	Antimony Pentachloride
39. 7789-61-9	Antimony Tribromide
40. 10025-91-9	Antimony Trichloride
41. 7783-56-4	Antimony Trifluoride
42. 1309-64-4	Antimony Trioxide
43. 1303-32-8	Arsenic Disulfide
44. 1303-28-2	Arsenic Pentoxide
45. 7784-34-1	Arsenic Trichloride
46. 1327-53-3	Arsenic Trioxide
47. 1303-33-9	Arsenic Trisulfide
48. 542-62-1	Barium Cyanide
49. 71-43-2	Benzene
50. 65-85-0	Benzoic Acid
51. 100-47-0	Benzonitrile
52. 98-88-4	Benzoyl Chloride
53. 100-44-7	Benzyl Chloride
54. 7440-41-7	Beryllium
55. 7787-47-8	Beryllium Chloride
56. 7787-49-7	Beryllium Fluoride
57. 13597-99-4	Beryllium Nitrate
58. 123-86-4	Butyl Acetate
59. 84-74-2	n-Butyl Phthalate
60. 109-73-9	Butylamine
61. 107-92-6	Butyric Acid
62. 543-90-8	Cadmium Acetate
63. 7789-42-6	Cadmium Bromide
64. 10108-64-2	Cadmium Chloride
65. 7778-44-1	Calcium Arsenate
66. 52740-16-6	Calcium Arsenite
67. 75-20-7	Calcium Carbide
68. 13765-19-0	Calcium Chromate
69. 592-01-8	Calcium Cyanide
70. 26264-06-2	Calcium Dodecylbenzene Sulfonate
71. 7778-54-3	Calcium Hypochlorite
72. 133-06-2	Captan
73. 63-25-2	Carbaryl
74. 1563-66-2	Carbofuran
75. 75-15-0	Carbon Disulfide
76. 56-23-5	Carbon Tetrachloride
77. 57-74-9	Chlordane
78. 7782-50-5	Chlorine
79. 108-90-7	Chlorobenzene
80. 67-66-3	Chloroform
81. 7790-94-5	Chlorosulfonic Acid
82. 2921-88-2	Chlorpyrifos
83. 1066-30-4	Chromic Acetate
84. 7738-94-5	Chromic Acid
85. 10101-53-8	Chromic Sulfate
86. 10049-05-5	Chromous Chloride
87. 544-18-3	Cobaltous Formate
88. 14017-41-5	Cobaltous Sulfamate
89. 56-72-4	Coumaphos
90. 1319-77-3	Cresol
91. 4170-30-3	Crotonaldehyde
92. 142-71-2	Cupric Acetate
93. 12002-03-8	Cupric Acetoarsenite
94. 7447-39-4	Cupric Chloride
95. 3251-23-8	Cupric Nitrate
96. 5893-66-3	Cupric Oxalate
97. 7758-98-7	Cupric Sulfate
98. 10380-29-7	Cupric Sulfate Ammoniated
99. 815-82-7	Cupric Tartrate
100. 506-77-4	Cyanogen Chloride
101. 110-82-7	Cyclohexane
102. 94-75-7	2,4-D Acid
103. 94-11-1	2,4-D Esters
104. 50-29-3	DDT
105. 333-41-5	Diazinon
106. 1918-00-9	Dicamba
107. 1194-65-6	Dichlobenil
108. 117-80-6	Dichlone
109. 25321-22-6	Dichlorobenzene (all isomers)
110. 26638-19-7	Dichloropropane (all isomers)
111. 26638-22-0	Dichloropropene (all isomers)
112. 8003-19-8	Dichloropropene-Dichloropropane Mixture
113. 75-99-0	2-2-Dichloropropionic Acid
114. 62-73-7	Dichlorvos
115. 60-57-1	Dieldrin
116. 109-89-7	Diethylamine
117. 124-40-3	Dimethylamine
118. 25154-54-5	Dinitrobenzene (all isomers)
119. 51-28-5	Dinitrophenol
120. 25321-14-6	Dinitrotoluene (all isomers)
121. 85-00-7	Diquat
122. 330-54-1	Diuron
123. 330-54-1	Diuron
124. 27176-87-0	Dodecylbenzenesulfonic Acid
125. 115-29-7	Endosulfan (all isomers)
126. 72-20-8	Endrin and Metabolites
127. 106-89-8	Epichlorohydrin
128. 563-12-2	Ethion
129. 100-41-4	Ethyl Benzene
130. 107-15-3	Ethylenediamine
131. 106-93-4	Ethylene Dibromide
132. 107-06-2	Ethylene Dichloride
133. 60-00-4	EDTA
134. 1185-57-5	Ferric Ammonium Citrate
135. 2944-67-4	Ferric Ammonium Oxalate
136. 7705-08-0	Ferric Chloride

Reference #1

OVERSIZED

DOCUMENT

MAP

ANAMAG

Reference No. 2

(Jefferson)

March 29, 1985

RECEIVED

APR 01 1985

Environmental Response Center

Mr. William C. Burger, Coordinator
Environmental Response Team
18 Reilly Road
Frankfort, Kentucky 40601

Dear Mr. Burger:

In accordance with 401 KAR 34:040, Section 7 (10), Contingency Plan and Emergency Procedures, the following is a report on an incident which required the implementation of a contingency plan.

AnaMag L.P., a limited partnership, maintains its executive office at:

Glen Hill Office Park 8
739 Roosevelt Road
Glen Ellyn, Illinois 60137
(312)858-4000

AnaMag owns and operates a magnet wire manufacturing facility at:

Highway 146 - P.O. box 29
LaGrange, Kentucky 40031
(502)222-9415

On Sunday, March 17, 1985, at approximately 10:30 a.m. the above facility experienced the unexpected, sudden release of approximately 250 gallons of a solvent material known as cresylic acid. For information purposes a Material Safety Data Sheet and manufacturers specification sheet for the released material are enclosed.

The following notifications were made:

1. Kentucky Environmental Response Center (March 18, 1985 @ noon)
   Person contacted: Mr. Tom Little

2. National Response Center
   Person contacted: Petty Officer Brown

The source of the release was a newly installed filtration system on a parts washing tank.

The released material entered an 18 inch storm sewer which leads to an earthen ditch and ultimately to a "cooling pond", all located on the AnaMag property. The released material was deposited and contained within the above referenced ditch and pond areas.

Because cresylic acid is heavier than water, a contractor was employed to pump the released material and contaminated soils from the bottom of the ditch and pond and deposit these materials in 55 gallon drums on site. It is believed the entire quantity of released material has been recovered. As the result of this recovery effort (45) 55 gallon drums of material were generated and will ultimately be disposed of by either Chemical Waste Management in Emelle, Alabama or LWD, Inc. in Calvert City, Kentucky.

AnaMag's LaGrange manufacturing facility is registered in the state of Kentucky as a hazardous waste generator with U.S. EPA, ID number KYD04-294-3423. The generated wastes will be transported for disposal in accordance with requirements of the 90 day accumulation regulation 401 KAR 32:030, Section

There were no injuries sustained as a result of this incident and it is believed there existed no hazard to human health in the past or remaining hazard in the future. Similarly, whatever hazard may have existed to the environment has now passed as of Monday, March 25, 1985, as determined by water analysis.

Should there be further questions concerning this incident, contact Henry W. Jones at (502)425-1057.

Best regards,

ANAMAG

Henry W. Jones

Henry W. Jones, Sr. Engineer
Energy and Environment

HWJ:tlt

cc: Mr. Kyland Smither
Division of Water

FEB 3 1986

CHARLOTTE E. BALDWIN
SECRETARY

MARTHA LAYNE COLLINS
GOVERNOR

COMMONWEALTH OF KENTUCKY
NATURAL RESOURCES AND ENVIRONMENTAL PROTECTION CABINET
DEPARTMENT FOR ENVIRONMENTAL PROTECTION
Division of Waste Management
730 Swan Street
P.O. Box 4513
Louisville, Kentucky 40204

January 28, 1986

Mr. Robert P. Carne
Engineering Manager
P.O. Box 29
LaGrange, Kentucky 40031

LETTER OF WARNING

Re: Anamag
KYD04-294-3423
Oldham County

Dear Mr. Carne:

An inspection of your plant was performed on January 22, 1986, by Ms. Marsha Swain of my staff. During this inspection, Ms. Swain observed the following violations of Kentucky Waste Management laws and regulations:

1) The handling code was left off of Manifest #00007. This was in violation of 401 KAR 32:020 Section 1. Recurrence of this violation could result in a formal action to assess penalties.

2) Inspection records showed that on three separate occasions at least one drum was stored over 90 days. The dates involved were October 10, 1985 to January 16, 1986; July 24, 1985 to November 1, 1985; June 25, 1985 to October 11, 1985. This was in violation of 401 KAR 32:030 Section 5. Recurrence of this violation could result in a formal action to assess penalties. A generator who accumulates hazardous waste for more than 90 days is an operator of a storage facility and is subject to the requirements of 401 KAR Chapters 34, 35 and 38, unless he has been granted an extension to the 90-day period. Such extensions may be granted by the Cabinet on a case-by-case basis if hazardous waste must remain on site for longer than 90 days due to unforeseen, temporary, and uncontrolled circumstances.

3) Inspection revealed that one drum in a satellite area did not have the accumulation date. Two drums in other satellite areas did not have the accumulation date nor the words "hazardous waste". This was in violation of 401 KAR 32:030 Section 5. Recurrence of these violations could result in a formal action to assess penalties.

4) Housekeeping needs to be improved. There were spills of hazardous waste around the varnish pans. This was in violation of 401 KAR 38:010 Section 4. All spills are to be cleaned up by February 24, 1986.

Regarding your spill of March 17, 1985, of cresylic acid which ultimately was released to a "cooling pond", it is suggested that a containment basin be built around the cresylic acid holding tank to avoid future hazardous waste regulation of the cooling pond in the event that this occurs in the future.

This Cabinet, under the authority of KRS 224.994, may assess penalties for these violations of up to $25,000 per violation, with each day a violation continues a separate offense. To avoid any further enforcement action, which could result in the assesament of penalties, you must correct these violations by February 24, 1986.

If you have any questions concerning the violations or the steps necessary to correct the violations, please call me or Ms. Swain at (502) 588-4254.

Sincerely,

John G. Brooks

John Brooks, Envir. Supervisor
Louisville Office

JGB:MS:dm

cc: Enforcement
Field Operations
Louisville File

CHARLOTTE E. BALDWIN
SECRETARY

MARTHA LAYNE COLLINS
GOVERNOR

COMMONWEALTH OF KENTUCKY
NATURAL RESOURCES AND ENVIRONMENTAL PROTECTION CABINET
DEPARTMENT FOR ENVIRONMENTAL PROTECTION
FORT BOONE PLAZA
18 REILLY ROAD
FRANKFORT, KENTUCKY 40601

MEMORANDUM

TO: Caroline P. Haight, Manager
Permit Reweiw Branch

THRU: Barry Burrus, Chief
Uncontrolled Site Section

FROM: Robert L. Prewitt, Environmental Program Coordinator
Uncontrolled Site Section

DATE: August 9, 1985

SUBJECT: Uncontrolled Site Closeout for Anaconda, Ind. Magnet Wire and Cable

The Anaconda, Ind. magnet wire and cable facility is located North of LaGrange, Kentucky in Oldham County. The facility manufactures various types of magnet wire and cables. From the process, a waste caustic wash solution is generated. Inclusion of the facility on the Region IV CERCLIS is due to the notification in 1980 of hazardous waste activity as a treatment, storage and disposal facility. In 1981, the Part A was officially withdrawn as a TSD facility, but the generator status was retained. In 1983, the facility's name changed to Anamag Limited.

The Dawkins Road Site in Oldham County presently has several drums with the Anaconda Industries name on them. There is no evidence of any other off-site disposal in the Division files. Conversations with the Louisville field office inspector indicates that the facility is in compliance and has had no on-site disposal. This facility is regulated by RCRA.

After reviewing information within the Division and completion of a preliminary assessment by Jim Jarman, I recommend this site receive no further action and be removed from the uncontrolled site list.

JJ/tlj

c: Marsha Swain
EPA
File

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT

EPA

I. IDENTIFICATION
01 STATE: KY | 02 SITE NUMBER: D042943423

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site)	02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER				
ANACONDA IND. MAGNET WIRE & Cable	Highway 146 Box 29				
03 CITY	04 STATE	05 ZIP CODE	06 COUNTY	07 COUNTY CODE	08 CONG DIST
LA GRANGE	KY	40031	OLDHAM	185	04
09 COORDINATES LATITUDE: 38°25'09"	LONGITUDE: 085°20'32"				

10 DIRECTIONS TO SITE (Starting from nearest public road)

TAKE Highway 146 NORTH From LA GRANGE, Ky. about 1 1/2 miles. Cross 1 SET of RAILROAD TRACKS AND TURN LEFT. The SITE is on the right. (SEE MAP.)

III. RESPONSIBLE PARTIES

01 OWNER (If known)	02 STREET (Business, mailing, residential)			
ANACONDA INDUSTRIES	4/4 MEADOW STREET			
03 CITY	04 STATE	05 ZIP CODE	06 TELEPHONE NUMBER	
WATERBURY	CT.	06702	(312) 858-4000	
07 OPERATOR (If known and different from owner)	08 STREET (Business, mailing, residential)			
William Peterson	Highway 146			
09 CITY	10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER	
LA GRANGE	KY	40031	(502) 222-9415	

13 TYPE OF OWNERSHIP (Check one)
☒ A. PRIVATE ☐ B. FEDERAL: _____ (Agency name) ☐ C. STATE ☐ D. COUNTY ☐ E. MUNICIPAL
☐ F. OTHER: _____ (Specify) ☐ G. UNKNOWN

14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply)
☐ A. RCRA 3001 DATE RECEIVED: ___/___/___ (MONTH DAY YEAR) ☐ B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: ___/___/___ (MONTH DAY YEAR) ☒ C. NONE

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON SITE INSPECTION
☒ YES ☐ NO DATE 2 28 85 (MONTH DAY YEAR)
BY (Check all that apply)
☐ A. EPA ☐ B. EPA CONTRACTOR ☑ C. STATE ☐ D. OTHER CONTRACTOR
☐ E. LOCAL HEALTH OFFICIAL ☐ F. OTHER: _____ (Specify)
CONTRACTOR NAME(S): _____

02 SITE STATUS (Check one)
☒ A. ACTIVE ☐ B. INACTIVE ☐ C. UNKNOWN

03 YEARS OF OPERATION
1967 (BEGINNING YEAR) | Present (ENDING YEAR) ☐ UNKNOWN

04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED

WASTE Caustic wash solutions
waste varnish & solvents.

05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION

NONE

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents)
☐ A. HIGH (Inspection required promptly) ☐ B. MEDIUM (Inspection required) ☐ C. LOW (Inspect on time available basis) ☒ D. NONE (No further action needed, complete current disposition form)

VI. INFORMATION AVAILABLE FROM

01 CONTACT	02 OF (Agency/Organization)	03 TELEPHONE NUMBER
MARSHA SWAIN	KNREPC - Division of Waste Management	(502) 589-4254

04 PERSON RESPONSIBLE FOR ASSESSMENT	05 AGENCY	06 ORGANIZATION	07 TELEPHONE NUMBER	08 DATE
Jim Jarman	KNREPC	Div. Waste Mgt.	(502) 564-6716	08 02 85 (MONTH DAY YEAR)

EPA FORM 2070-12 (7-81)

EPA

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 2 - WASTE INFORMATION

I. IDENTIFICATION

01 STATE	02 SITE NUMBER
KY	D042943423

II. WASTE STATES, QUANTITIES, AND CHARACTERISTICS

01 PHYSICAL STATES (Check all that apply)

- ☐ A. SOLID
- ☐ B. POWDER, FINES
- ☐ C. SLUDGE
- ☐ E. SLURRY
- ☒ F. LIQUID
- ☐ G. GAS
- ☒ D. OTHER N/A (Specify)

02 WASTE QUANTITY AT SITE (Measures of waste quantities must be independent)

- TONS
- CUBIC YARDS N/A
- NO. OF DRUMS

03 WASTE CHARACTERISTICS (Check all that apply)

- ☐ A. TOXIC
- ☐ B. CORROSIVE
- ☐ C. RADIOACTIVE
- ☐ D. PERSISTENT
- ☐ E. SOLUBLE
- ☐ F. INFECTIOUS
- ☐ G. FLAMMABLE
- ☐ H. IGNITABLE
- ☐ I. HIGHLY VOLATILE
- ☐ J. EXPLOSIVE
- ☐ K. REACTIVE
- ☐ L. INCOMPATIBLE
- ☒ M. NOT APPLICABLE

III. WASTE TYPE

CATEGORY	SUBSTANCE NAME	01 GROSS AMOUNT	02 UNIT OF MEASURE	03 COMMENTS
SLU	SLUDGE			
OLW	OILY WASTE			
SOL	SOLVENTS	N/A		N/A
PSD	PESTICIDES			
OCC	OTHER ORGANIC CHEMICALS	Site is	IN Compliance	with RCRA Inspections.
IOC	INORGANIC CHEMICALS			
ACD	ACIDS			
BAS	BASES			
MES	HEAVY METALS			

IV. HAZARDOUS SUBSTANCES (See Appendix for most frequently cited CAS Numbers)

01 CATEGORY	02 SUBSTANCE NAME	03 CAS NUMBER	04 STORAGE/DISPOSAL METHOD	05 CONCENTRATION	06 MEASURE OF CONCENTRATION
	N/A		N/A		
	All wastes are Removed and transported to Emelle Alabama's				
	Hazardous Waste Facility. See Annual Report attached.				

V. FEEDSTOCKS (See Appendix for CAS Numbers)

CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER	CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER
FDS			FDS		
FDS			FDS		
FDS			FDS		
FDS			FDS		

VI. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

KNREPC STATE FILES

EPA

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE	02 SITE NUMBER
Ky	D042943423

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A. GROUNDWATER CONTAMINATION — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

N/A

01 ☐ B. SURFACE WATER CONTAMINATION — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

N/A

01 ☐ C. CONTAMINATION OF AIR — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

N/A

01 ☐ D. FIRE/EXPLOSIVE CONDITIONS — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

N/A

01 ☐ E. DIRECT CONTACT — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

N/A

01 ☐ F. CONTAMINATION OF SOIL — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 AREA POTENTIALLY AFFECTED: _____ (Acres) 04 NARRATIVE DESCRIPTION

N/A

01 ☐ G. DRINKING WATER CONTAMINATION — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

N/A

01 ☐ H. WORKER EXPOSURE/INJURY — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 WORKERS POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

N/A

01 ☐ I. POPULATION EXPOSURE/INJURY — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

N/A

EPA

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER
KY	D042943423

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

01 ☐ K. DAMAGE TO FAUNA — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION (Include name(s) of species)

N/A

01 ☐ L. CONTAMINATION OF FOOD CHAIN — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

01 ☐ M. UNSTABLE CONTAINMENT OF WASTES (Spills, runoff, standing liquids, leaking drums) — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

N/A

01 ☐ N. DAMAGE TO OFFSITE PROPERTY — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

01 ☒ P. ILLEGAL/UNAUTHORIZED DUMPING — 02 ☐ OBSERVED (DATE: 1983) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

~100 Drums of phenolic type compounds dumped on property IN LaGrange, Ky - Oldham County. That Site is Known as the Dawkins Road Site.

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

N/A

III. TOTAL POPULATION POTENTIALLY AFFECTED: _____

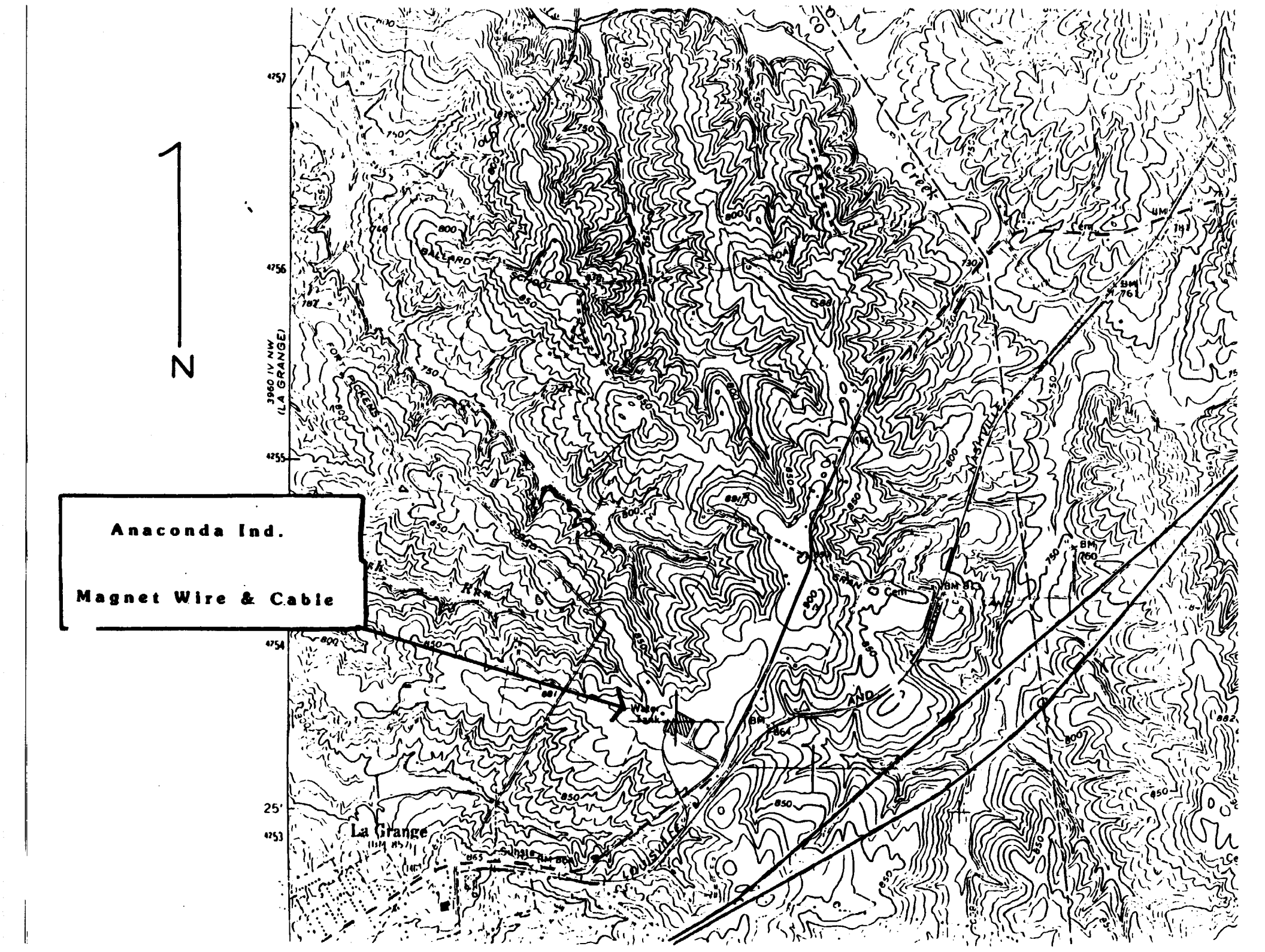
IV. COMMENTS

THE Site in question is in compliance with Inspections By RCRA As A generator. A part A was filed in 1980 and withdrawn in SEPT., 1981. I recommend this site receive NO Further Action. However, the DAWKins Road site (OLDHAM Co.) contains Drums with Anaconda's Name on Them.

V. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analyses, reports)

KNREPC FILES.

EPA FORM 2070-12 (7-81)


N
Anaconda Ind.
Magnet Wire & Cable
La Grange
3960 IV NW
(LA GRANGE)
25'
4757
4756
4755
4754
4753
BALLARD
SCHOOL
FOR
PICKENS
ASHVILLE
LOUISVILLE
AND
Creek

CHARLOTTE E. BALDWIN
SECRETARY

MARTHA LAYNE COLLINS
GOVERNOR

COMMONWEALTH OF KENTUCKY
NATURAL RESOURCES AND ENVIRONMENTAL PROTECTION CABINET
DEPARTMENT FOR ENVIRONMENTAL PROTECTION
FORT BOONE PLAZA
18 REILLY ROAD
FRANKFORT, KENTUCKY 40601

Documentation package
FOR ANAConda IND.
Magnet Wire & Cable

MEMORANDUM

TO: Barry Burrus, Chief
Uncontrolled Site Section

FROM: Bob Prewitt
Uncontrolled Site Section

DATE: February 14, 1984

SUBJECT: Kentucky Uncontrolled Site Preliminary Assessment Report

Site Name: Dawkins Road Site,
Location: Dawkins Road, LaGrange, Ky.

Site Coordinator: Bob Prewitt
Field Contact: Marsha Swain

Background

The Dawkins Road Site is located in a junkyard, on Dawkins Road about 3/4 mile off of Hwy 146 west of LaGrange, Ky.

The junkyard is owned and operated by Jim Sanders. Between 1974-76 Mr. Sanders accepted approximately 100 drums of waste from Anaconda in LaGrange. Mr. Sanders emptied the contents of a few of these drums on the ground so he could clean and reuse them. The odor from the waste was so noxious he placed the remaining drums into an empty pond on his property and covered them with dirt. An inspection on November 30, 1982 by the field office noted a phenolic odor still present around the site. Samples were taken from different areas at this site by the Louisville Field office and analysis of these samples revealed high concentrations of phenol, napthalene and cresylic acid.

EPA Documents

Transmittal letter
Preliminary Assessment Form 2070-12

Additional Information

A Geological Assessment of this site was done November 18, 1983 by Jim Jarman. It will be included with the PA for EPA's perusal.

Recommended Action

Considering the facts that we are dealing with listed hazardous wastes and an area that lends itself to groundwater contamination, the site was given a medium priority by EPA's ranking system. This very simply means a site inspection is required. It is also my recommendation that due to the scope of investigation needed this should be handled by the EPA FIT.

BP/kwb

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT

EPA

I. IDENTIFICATION
01 STATE: Ky | 02 SITE NUMBER:

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site)	02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER
Dawkins Road Site	Behind Jim Sanders Dump

03 CITY	04 STATE	05 ZIP CODE	06 COUNTY	07 COUNTY CODE	08 CONG DIST
La Grange	Ky	40031	Oldham		

09 COORDINATES LATITUDE	LONGITUDE
38 24 30.0	-85 24 01.3

10 DIRECTIONS TO SITE (Starting from nearest public road)
From Hwy 146 West of LaGrange take Dawkins Rd 3/4 mile to Jim Sanders junkyard on right

III. RESPONSIBLE PARTIES

01 OWNER (If known)	02 STREET (Business, mailing, residential)
Jim Sanders	Dawkins Rd

03 CITY	04 STATE	05 ZIP CODE	06 TELEPHONE NUMBER
La Grange	Ky	40031	( ) none

07 OPERATOR (If known and different from owner)	08 STREET (Business, mailing, residential)
Same	

09 CITY	10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER
			( )

13 TYPE OF OWNERSHIP (Check one)
☒ A. PRIVATE ☐ B. FEDERAL: _____ (Agency name) ☐ C. STATE ☐ D. COUNTY ☐ E. MUNICIPAL
☐ F. OTHER: _____ (Specify) ☐ G. UNKNOWN

14 OWNER-OPERATOR NOTIFICATION ON FILE (Check all that apply)
☐ A. RCRA 3001 DATE RECEIVED: ___/___/___ (MONTH DAY YEAR) ☐ B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: ___/___/___ (MONTH DAY YEAR) ☒ C. NONE

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON-SITE INSPECTION
☒ YES ☐ NO DATE 1/11/83 (MONTH DAY YEAR)
BY (Check all that apply)
☐ A. EPA ☐ B. EPA CONTRACTOR ☒ C. STATE ☐ D. OTHER CONTRACTOR
☐ E. LOCAL HEALTH OFFICIAL ☐ F. OTHER: _____ (Specify)
CONTRACTOR NAME(S): _____

02 SITE STATUS (Check one)
☒ A. ACTIVE ☐ B. INACTIVE ☐ C. UNKNOWN

03 YEARS OF OPERATION
BEGINNING YEAR _____ ENDING YEAR _____ ☐ UNKNOWN

04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED
results of 1/11/83 sampling revealed phenol, naphthalene, cresylic acid (o-cresol m-cresol p-cresol)

05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION
Due to the geological formation in this area and the concentrations of hazardous wastes present the potential for contamination is very high.

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents)
☐ A - HIGH (Inspection required promptly) ☒ B. MEDIUM (Inspection required) ☐ C. LOW (Inspect on an as available basis) ☐ D. NONE (No further action needed, complete current disposition form)

VI. INFORMATION AVAILABLE FROM

01 CONTACT	02 OF (Agency/Organization)	03 TELEPHONE NUMBER
Marsha Swain	Div Waste Mgt Louisville Field Off	(502) 588-4254

04 PERSON RESPONSIBLE FOR ASSESSMENT	05 AGENCY	06 ORGANIZATION	07 TELEPHONE NUMBER	08 DATE
Bob Prewitt	Ky Div Wm	Uncontrolled Sites	(502) 564-6716	11 18 83 (MONTH DAY YEAR)

EPA FORM 2070-12 (7-81)

EPA

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 2 - WASTE INFORMATION

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER

WASTE STATES, QUANTITIES, AND CHARACTERISTICS

PHYSICAL STATES (Check all that apply)

- ☐ A. SOLID
- ☐ B. POWDER, FINES
- ☐ C. SLUDGE
- ☐ D. OTHER _____ (Specify)
- ☐ E. SLURRY
- ☒ F. LIQUID
- ☐ G. GAS

02 WASTE QUANTITY AT SITE (Measures of waste quantities must be independent)

- TONS _____
- CUBIC YARDS _____
- NO. OF DRUMS 100

03 WASTE CHARACTERISTICS (Check all that apply)

- ☒ A. TOXIC
- ☐ B. CORROSIVE
- ☐ C. RADIOACTIVE
- ☐ D. PERSISTENT
- ☐ E. SOLUBLE
- ☐ F. INFECTIOUS
- ☐ G. FLAMMABLE
- ☐ H. IGNITABLE
- ☐ I. HIGHLY VOLATILE
- ☐ J. EXPLOSIVE
- ☐ K. REACTIVE
- ☐ L. INCOMPATIBLE
- ☐ M. NOT APPLICABLE

II. WASTE TYPE

CATEGORY	SUBSTANCE NAME	01 GROSS AMOUNT	02 UNIT OF MEASURE	03 COMMENTS
SLU	SLUDGE			
OLW	OILY WASTE			
SOL	SOLVENTS			
PSD	PESTICIDES			
OCC	OTHER ORGANIC CHEMICALS	100 DR		drums were compacted & covered
IOC	INORGANIC CHEMICALS			
ACD	ACIDS			
BAS	BASES			
MES	HEAVY METALS			

III. HAZARDOUS SUBSTANCES (See Appendix for most frequently cited CAS Numbers)

01 CATEGORY	02 SUBSTANCE NAME	03 CAS NUMBER	04 STORAGE/DISPOSAL METHOD	05 CONCENTRATION	06 MEASURE OF CONCENTRATION
OCC	Cresol	1319-77-3	compacted drums	3985.0	mg/kg
OCC	phenol	108-95-2	" "	220.0	"
OCC	naphthalene	91-20-3	" "	468.0	"

IV. FEEDSTOCKS (See Appendix for CAS Numbers)

CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER	CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER
FDS	naphthalene	91-20-3	FDS		
FDS			FDS		
FDS			FDS		
FDS			FDS		

VI. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

State sample analysis
State files

EPA

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER

HAZARDOUS CONDITIONS AND INCIDENTS

1 [X] A. GROUNDWATER CONTAMINATION — 02 [ ] OBSERVED (DATE _____) — [X] POTENTIAL — [ ] ALLEGED
3 POPULATION POTENTIALLY AFFECTED: _____
04 NARRATIVE DESCRIPTION

see geologic report

1 [X] B. SURFACE WATER CONTAMINATION — 02 [ ] OBSERVED (DATE _____) — [X] POTENTIAL — [ ] ALLEGED
3 POPULATION POTENTIALLY AFFECTED: _____
04 NARRATIVE DESCRIPTION

Drums were emptied on the ground others were compacted & buried

1 [ ] C. CONTAMINATION OF AIR — 02 [ ] OBSERVED (DATE _____) — [ ] POTENTIAL — [ ] ALLEGED
3 POPULATION POTENTIALLY AFFECTED: _____
04 NARRATIVE DESCRIPTION

1 [ ] D. FIRE EXPLOSIVE CONDITIONS — 02 [ ] OBSERVED (DATE _____) — [ ] POTENTIAL — [ ] ALLEGED
3 POPULATION POTENTIALLY AFFECTED: _____
04 NARRATIVE DESCRIPTION

1 [X] E. DIRECT CONTACT — 02 [ ] OBSERVED (DATE _____) — [X] POTENTIAL — [ ] ALLEGED
3 POPULATION POTENTIALLY AFFECTED: _____
04 NARRATIVE DESCRIPTION

1 [X] F. CONTAMINATION OF SOIL — 02 [X] OBSERVED (DATE 11/30/82) — [ ] POTENTIAL — [ ] ALLEGED
AREA POTENTIALLY AFFECTED: _____ (Acres)
04 NARRATIVE DESCRIPTION

Drums were emptied on the ground sometime between 1974 & 1976

[X] G. DRINKING WATER CONTAMINATION — 02 [ ] OBSERVED (DATE _____) — [ ] POTENTIAL — [ ] ALLEGED
POPULATION POTENTIALLY AFFECTED: _____
04 NARRATIVE DESCRIPTION

see geologic report

1 [ ] H. WORKER EXPOSURE/INJURY — 02 [ ] OBSERVED (DATE _____) — [ ] POTENTIAL — [ ] ALLEGED
3 WORKERS POTENTIALLY AFFECTED: _____
04 NARRATIVE DESCRIPTION

1 [ ] I. POPULATION EXPOSURE INJURY — 02 [ ] OBSERVED (DATE _____) — [ ] POTENTIAL — [ ] ALLEGED
3 POPULATION POTENTIALLY AFFECTED: _____
04 NARRATIVE DESCRIPTION

EPA

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER

ARDOUS CONDITIONS AND INCIDENTS (Continued)

J. DAMAGE TO FLORA
RRATIVE DESCRIPTION
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

K. DAMAGE TO FAUNA
RRATIVE DESCRIPTION (Include name(s) of species)
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

L. CONTAMINATION OF FOOD CHAIN
RRATIVE DESCRIPTION
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

M. UNSTABLE CONTAINMENT OF WASTES
(Spills/runoff/standing liquids, leaking drums)
PULATION POTENTIALLY AFFECTED: _____
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N. DAMAGE TO OFFSITE PROPERTY
RRATIVE DESCRIPTION
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs
RRATIVE DESCRIPTION
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

P. ILLEGAL/UNAUTHORIZED DUMPING
RRATIVE DESCRIPTION
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☒ ALLEGED

Approximately 100 drums were placed in a 15 x 30 ft pond compacted & covered by dirt

CRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

TAL POPULATION POTENTIALLY AFFECTED: _____

MMENTS

URCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

State files
Attached Geological assessment

EPA

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER

HAZARDOUS CONDITIONS AND INCIDENTS

01 [X] A. GROUNDWATER CONTAMINATION — 02 [ ] OBSERVED (DATE _____) — [X] POTENTIAL — [ ] ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ — 04 NARRATIVE DESCRIPTION

see geologic report

01 [X] B. SURFACE WATER CONTAMINATION — 02 [ ] OBSERVED (DATE _____) — [X] POTENTIAL — [ ] ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ — 04 NARRATIVE DESCRIPTION

Drums were emptied on the ground others were compacted & buried

01 [ ] C. CONTAMINATION OF AIR — 02 [ ] OBSERVED (DATE _____) — [ ] POTENTIAL — [ ] ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ — 04 NARRATIVE DESCRIPTION

01 [ ] D. FIRE/EXPLOSIVE CONDITIONS — 02 [ ] OBSERVED (DATE _____) — [ ] POTENTIAL — [ ] ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ — 04 NARRATIVE DESCRIPTION

01 [X] E. DIRECT CONTACT — 02 [ ] OBSERVED (DATE _____) — [X] POTENTIAL — [ ] ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ — 04 NARRATIVE DESCRIPTION

01 [X] F. CONTAMINATION OF SOIL — 02 [X] OBSERVED (DATE 11/30/82) — [ ] POTENTIAL — [ ] ALLEGED
03 AREA POTENTIALLY AFFECTED: _____ (Acres) — 04 NARRATIVE DESCRIPTION

Drums were emptied on the ground sometime between 1974 & 1976

01 [X] G. DRINKING WATER CONTAMINATION — 02 [ ] OBSERVED (DATE _____) — [ ] POTENTIAL — [ ] ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ — 04 NARRATIVE DESCRIPTION

see geologic report

01 [ ] H. WORKER EXPOSURE/INJURY — 02 [ ] OBSERVED (DATE _____) — [ ] POTENTIAL — [ ] ALLEGED
03 WORKERS POTENTIALLY AFFECTED: _____ — 04 NARRATIVE DESCRIPTION

01 [ ] I. POPULATION EXPOSURE/INJURY — 02 [ ] OBSERVED (DATE _____) — [ ] POTENTIAL — [ ] ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ — 04 NARRATIVE DESCRIPTION

REF: 4AW-RM

This letter was sent 12-16-81 to the attached list of KY facilities.

Gentlemen:

This letter is to acknowledge receipt of your request for withdrawal of your application for a permit under the Resource Conservation and Recovery Act (RCRA), as amended. Your letter indicated that you no longer treat, store, or dispose of hazardous waste.

It has been our general experience that the RCRA regulations and the amendments which have been published since May 19, 1980, have caused confusion, and have been subjected to misinterpretation. This confusion on the part of the regulated community has been compounded, due to EPA's and the State's overlapping responsibilities for implementation of the hazardous waste regulatory program during the period of interim authorization.

Withdrawal of your permit application constitutes revokation of interim status, as defined by Section 3005(e) of the Act. Consequently, under the Federal program, you would no longer be allowed to treat, store, or dispose of hazardous waste. However, as you are probably aware, the State has been authorized to implement certain requirements of the program in lieu of the Federal regulatory requirements. Therefore, withdrawal of your applications also directly affect the State program.

In light of the foregoing, EPA plans to proceed as follows. EPA will place your file in our "suspense" file. This action, in essence, revokes you interim status under the Federal program. However, we will forward the request to the State for formal action. The State will contact you if further information relating to your request is required. If the State agrees that your waste is not hazardous, and that you do not need a RCRA permit, the State will notify you of this determination, and by carbon copy of this notification sent to EPA, your application will be formally withdrawn, and your file will be inactivated.

In conclusion, this letter should <u>not</u> be construed as EPA's concurrence with your determination that RCRA regulatory requirements are not applicable to your facility. Furthermore, this letter does not relieve you of your responsibility to comply with State and Local hazardous waste regulatory requirements.

Anaconda

Finally, your request to withdraw interim status means that you may not treat, store, or dispose of hazardous waste without a permit issued under the authority of §3005 of the Act and 40 CFR 264.

If for any reason you wish to reconsider this withdrawal request, please advise this office and the State within the next ten days. You should be receiving a formal response to your request from the State in the near future. If you require further clarification, please contact John Herrmann of my staff (404) 881-3433 or a representative of the State hazardous waste program.

Sincerely yours,

James H. Scarbrough, Chief
Residuals Management Branch

4AW-RM:JHERRMANN:sm:3433:12/4/81: 0017S

4AW-RM	4AW-RM	4AW-RM
Herrmann	Dickinson	Scarbrough

REQUEST

ANACONDA Industries
ANACONDA Magnet Wire Engineering Center
8th Street & Clay Avenue
Muskegon, Michigan 49440
Telephone 616 726 4924

000305

February 6, 1981

Permits Section
U. S. Environmental Protection Agency
345 Courtland Street N. E.
Atlanta, Ga 30365

Re: KYD042943423

Dear Sir:

Athough we applied for a permit to store hazardous waste at our LaGrange, Kentucky facility, we now elect not to store, so will not retain our waste over 90 days. Please cancel our application for a permit to store hazardous waste.

C

decided on 7/84

Sincerely,

ANACONDA INDUSTRIES
Magnet Wire

Charles Henricks

Charles Henricks, Manager
Energy and Environment

CH/vm

...ith ELITE type (12 characters/inch) in the unshaded areas only.

Form Approved OMB No. 158-S79016
GSA No. 0246-EPA-OT

U.S. ...RONMENTAL PROTECTION AGENCY

NOTIFICATI...OF HAZARDOUS WASTE ACTIVI...

INSTRUCTIONS: If you received a preprint label, affix it in the space at left. If any of t information on the label is incorrect, draw a li through it and supply the correct informati in the appropriate section below. If the label complete and correct, leave items I, II, and below blank. If you did not receive a preprint label, complete all items. "Installation" means single site where hazardous waste is generate treated, stored and/or disposed of, or a tran porter's principal place of business. Please ref to the INSTRUCTIONS FOR FILING NOTIF CATION before completing this form. Th information requested herein is required by la *(Section 3010 of the Resource Conservation an Recovery Act).*

...STALLA-...ION'S EPA I.D. NO.

I. NAME OF INSTALLATION

II. INSTALLATION MAILING ADDRESS

III. LOCATION OF INSTALLATION

000123

PLEASE PLACE LABEL IN THIS SPACE

EPA/REGION IV

SEP 15 12 32 PM '80

DETACH

FOR OFFICIAL USE ONLY

COMMENTS

INSTALLATION'S EPA I.D. NUMBER: FKSDOK29K3K2R2J

APPROVED:

DATE RECEIVED (yr., mo., & day): 80 09 15

I. NAME OF INSTALLATION

ANACONDA INDUSTRIES MAGNET WIRE

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX: PO BOX 26

CITY OR TOWN: LAGRANGE ST.: KY ZIP CODE: 40031

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER: HIGHWAY 146

CITY OR TOWN: LAGRANGE ST.: KY ZIP CODE: 40031

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title): HENRICKS CHARLES SUPV E&E

PHONE NO. (area code & no.): 616-726-4924

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER: ANACONDA INDUSTRIES

B. TYPE OF OWNERSHIP (enter the appropriate letter into box): M

F = FEDERAL
M = NON-FEDERAL

VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))

- [X] A. GENERATION
- [ ] B. TRANSPORTATION (complete item VII)
- [X] C. TREAT/STORE/DISPOSE
- [ ] D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION (transporters only – enter "X" in the appropriate box(es))

- [ ] A. AIR
- [ ] B. RAIL
- [ ] C. HIGHWAY
- [ ] D. WATER
- [ ] E. OTHER (specify):

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA I.D. Number in the space provided below.

- [X] A. FIRST NOTIFICATION
- [ ] B. SUBSEQUENT NOTIFICATION (complete item C)

C. INSTALLATION'S EPA I.D. NO.

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

I.D. — W

A. HAZARDOUS WASTES FROM NON–SPECIFIC SOURCES. Enter the four–digit number from 40 CFR Part 261.31 for each listed hazardous waste from non–specific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
F003	F004				
7	**8**	**9**	**10**	**11**	**12**

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four–digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	**20**	**21**	**22**	**23**	**24**
25	**26**	**27**	**28**	**29**	**30**

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four–digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
U054	U188	U239			
37	**38**	**39**	**40**	**41**	**42**
43	**44**	**45**	**46**	**47**	**48**

D. LISTED INFECTIOUS WASTES. Enter the four–digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

E. CHARACTERISTICS OF NON–LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non–listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24.)

[X] 1. IGNITABLE (D001)
[ ] 2. CORROSIVE (D002)
[ ] 3. REACTIVE (D003)
[ ] 4. TOXIC (D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE	NAME & OFFICIAL TITLE (type or print)	DATE SIGNED
W. Peterson	Plant Manager	8-13-80

EPA Form 8700-12 (6-80) REVERSE

WILLIAM G. PETERSON

DETACH

...ed areas only
...ype, i.e., 12 charr ...7/inch).

Form Approved OMB No. 158-R0175

U.S. ENVIRONMENTAL PROTECTION AGENCY

EPA GENERAL INFORMATION

Consolidated Permits Program

(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER

F	K	Y	D	0	4	2	9	4	3	4	2	3	

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent *(the area to the left of the label space lists the information that should appear)*, please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI *(except VI-B which must be completed regardless)*. Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

ITEMS

I. I.D. NUMBER

III. FACILITY NAME

V. FACILITY MAILING ADDRESS

VI. FACILITY LOCATION

PLEASE PLACE LABEL IN THIS SPACE

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK "X" YES	NO	FORM ATTACHED	SPECIFIC QUESTIONS	MARK "X" YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility *(either existing or proposed)* include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)	X			D. Is this a proposed facility *(other than those described in A or B above)* which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X			F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

SKIP: ANACONDA INDUSTRIES MAGNET WIRE

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)	B. PHONE (area code & no.)
PETERSON WILLIAM PLANT MANAGER	502 222 9415

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX			
P.O. BOX 26			
B. CITY OR TOWN	**C. STATE**	**D. ZIP CODE**	
LAGRANGE	KY	40031	

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER			
HIGHWAY 146			
B. COUNTY NAME			
OLDHAM			
C. CITY OR TOWN	**D. STATE**	**E. ZIP CODE**	**F. COUNTY CODE** (if known)
LAGRANGE	KY	40031	

A. FIRST		B. SECOND	
3357	(specify) Drawing and Insulating non-Ferrous Wire	7	(specif

C. THIRD		D. FOURTH	
	(specify)	7	(specify)

III. OPERATOR INFORMATION

A. NAME: ANACONDA INDUSTRIES

B. Is the name listed in Item VIII-A also the owner? [X] YES [ ] NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)
F = FEDERAL, S = STATE, P = PRIVATE, M = PUBLIC (other than federal or state), O = OTHER (specify)
P (specify)

D. PHONE (area code & no.): A 203 574 8500

E. STREET OR P.O. BOX: 14 MEADOW STREET

F. CITY OR TOWN: WATERBURY

G. STATE: CT

H. ZIP CODE: 06702

IX. INDIAN LAND

Is the facility located on Indian lands? [ ] YES [X] NO

EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water): N KY0002208

D. PSD (Air Emissions from Proposed Sources): 9P

B. UIC (Underground Injection of Fluids): U

E. OTHER (specify): 9 104 3100 0004 (specify) KY Air Pollution Control

C. RCRA (Hazardous Wastes): R

E. OTHER (specify): 9 (specify)

MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

NATURE OF BUSINESS (provide a brief description)

Draw and insulate copper wire

XI. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
H. M. WENZEL, VICE PRES.-GEN.MGR.		/ /

COMMENTS FOR OFFICIAL USE ONLY

...ed areas only
...e type, i.e., 12 characters/inch).

Form Approved OMB No. 158-S80004

U.S. ...IRONMENTAL PROTECTION AGENCY

HAZARD... JS WASTE PERMIT APPLICATION

Consolidated Permits Program

(This information is required under Section 3005 of RCRA.)

I. EPA I.D. NUMBER

F	K	Y	D	0	4	2	9	4	3	4	2	3	3

...ICIAL USE ONLY

...ATION ROVED	DATE RECEIVED (yr., mo., & day)	COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below *(mark one box only)* to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION *(place an "X" below and provide the appropriate date)*

[X] 1. EXISTING FACILITY *(See instructions for definition of "existing" facility. Complete item below.)*

FOR EXISTING FACILITIES, PROVIDE THE DATE *(yr., mo., & day)* OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED *(use the boxes to the left)*

YR.	MO.	DAY
8 7	0 2	0 1

[ ] 2. NEW FACILITY *(Complete item below.)*

FOR NEW FACILITIES, PROVIDE THE DATE *(yr., mo., & day)* OPERATION BEGAN OR IS EXPECTED TO BEGIN

YR.	MO.	DAY

B. REVISED APPLICATION *(place an "X" below and complete Item I above)*

[ ] 1. FACILITY HAS INTERIM STATUS

[ ] 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES – CODES AND DESIGN CAPACITIES

A. PROCESS CODE – Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process *(including its design capacity)* in the space provided on the form *(Item III-C)*.

B. PROCESS DESIGN CAPACITY – For each code entered in column A enter the capacity of the process.

1. AMOUNT – Enter the amount.
2. UNIT OF MEASURE – For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:		
CONTAINER *(barrel, drum, etc.)*	S01	GALLONS OR LITERS
TANK	S02	GALLONS OR LITERS
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS
Disposal:		
INJECTION WELL	D79	GALLONS OR LITERS
LANDFILL	D80	ACRE-FEET *(the volume that would cover one acre to a depth of one foot)* OR HECTARE-METER
LAND APPLICATION	D81	ACRES OR HECTARES
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Treatment:		
TANK	T01	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
OTHER *(Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)*	T04	GALLONS PER DAY OR LITERS PER DAY

UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G
LITERS	L
CUBIC YARDS	Y
CUBIC METERS	C
GALLONS PER DAY	U
LITERS PER DAY	V
TONS PER HOUR	D
METRIC TONS PER HOUR	W
GALLONS PER HOUR	E
LITERS PER HOUR	H
ACRE-FEET	A
HECTARE-METER	F
ACRES	B
HECTARES	Q

EXAMPLE FOR COMPLETING ITEM III *(shown in line numbers X-1 and X-2 below)*: A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT (specify)	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY
X-1	S 0 2	600	G	
X-2	T 0 3	20	E	
1	S 0 1	8700	G	
2				
3				
4				

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY
5				
6				
7				
8				
9				
10				

DUP [ ] [1]

ontinued from the front.

II. PROCESSES (continued)

SPACE FOR ADDITIONAL PROCESS CODES OR DESCRIBING OTHER PROCESSES (code "") FOR EACH PROCESS INCLUDE DESIGN CAPACITY.

V. DESCRIPTION OF HAZARDOUS WASTES

EPA HAZARDOUS WASTE NUMBER — Enter the four–digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four–digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non–listed waste(s) that will be handled which possess that characteristic or contaminant.

UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

PROCESSES

1. PROCESS CODES:
   For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.
   For non–listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non–listed hazardous wastes that possess that characteristic or toxic contaminant.
   Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).
2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

TE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by e than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

AMPLE FOR COMPLETING ITEM IV *(shown in line numbers X-1, X-2, X-3, and X-4 below)* — A facility will treat and dispose of an estimated 900 pounds year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non–listed wastes. Two wastes corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated) pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
1	K054	900	P	T03 D80	
2	D002	400	P	T03 D80	
3	D001	100	P	T03 D80	
4	D002				included with above

...page before completing if ... have more than 26 wastes to list.

Form Approved OMB No. 158-S80004

...MBER (enter from page 1)

											T/A	C
U	0	4	2	9	4	3	4	2	3		3	1

FOR OFFICIAL USE ONLY

													T/A	C						
W						D	U	P						2	D	U	P			

. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (If a code is not entered in D(1))
1	F003	70,000	P	S01	
2	F004	70,000	P	S01	
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					

CONTINUE ON REVER...

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS, INCLUDE DESIGN CAPACITY.

. DESCRIPTION OF HAZARDOUS WASTES

EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

f facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into ccount the appropriate density or specific gravity of the waste.

ROCESSES

. **PROCESS CODES:**

For listed hazardous wastes: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by :han one EPA Hazardous Waste Number shall be described on the form as follows:

Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.

In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.

Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

TPLE FOR COMPLETING ITEM IV *(shown in line numbers X-1, X-2, X-3, and X-4 below)* — A facility will treat and dispose of an estimated 900 pounds ar of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two waste rrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated ounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
K 0 5 4	900	P	T 0 3 D 8 0	
D 0 0 2	400	P	T 0 3 D 8 0	
D 0 0 1	100	P	T 0 3 D 8 0	
D 0 0 2				*included with above*

ıtinued from the front.

. DESCRIPTION OF HAZARDOUS WASTE (continued)

USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE

EPA I.D. NO. (enter from page 1)

K	Y	D	0	4	2	9	4	3	4	2	3	3	6

FACILITY DRAWING

l existing facilities must include in the space provided on page 5 a scale drawing of the facility *(see instructions for more detail).*

. PHOTOGRAPHS

ll existing facilities must include photographs *(aerial or ground—level)* that clearly delineate all existing structures; existing storage, eatment and disposal areas; and sites of future storage, treatment or disposal areas *(see instructions for more detail).*

I. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)	LONGITUDE (degrees, minutes, & seconds)
38 25 09	85 20 32 5

II. FACILITY OWNER

☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER	2. PHONE NO. (area code & no.)

3. STREET OR P.O. BOX	4. CITY OR TOWN	5. ST.	6. ZIP CODE
	C G		

. OWNER CERTIFICATION

ertify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached cuments, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the bmitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, cluding the possibility of fine and imprisonment.

NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
H.M.WENZEL, VICE PRES.-GEN.MGR.		

. OPERATOR CERTIFICATION

ertify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached cuments, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the bmitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, cluding the possibility of fine and imprisonment.

NAME (print or type)	B. SIGNATURE	C. DATE SIGNED

HAZARDOUS WASTE INFORMATION SUMMARY (CONTINUED)

INSTALLATION NAME: ANACONDA INDUSTRIES, MAGNET WIRE

EPA ID NUMBER: KYD04-294-3423

LINE NUMBER	DESCRIPTION OF WASTE	EPA WASTE NUMBER	DOT HAZARD CLASS	PHYSICAL STATE	AMOUNT OF WASTE	UNIT OF MEASURE	DISPOSITION CODE	TRANSFER CODE	HANDLING METHOD
1	WASTE CAUSTIC WASH SOLUTION UN1760	D002	CM	L&M	440	G	KYXT	ALD000622464	

Reference No. 5

70

"Rite in the Rain"
WEATHERPROOF

LEVEL

NOTEBOOK NO. 311

F4-1103

Anaconda Ind. Inc. Magnet Wire and Cable F4-8808-70

LaGrange, Oldham Cty.

Kentucky

EPA

POTENTIAL HAZARDOUS WASTE SITE
TENTATIVE DISPOSITION

REGION: IV | SITE NUMBER: KYD 042 943 423

File this form in the regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335); 401 M St., SW; Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME	B. STREET	
Anaconda Ind., Magnet Wire + Cable	Hwy 146	
C. CITY	**D. STATE**	**E. ZIP CODE**
La Grange (Oldham Co)	KY	40031

II. TENTATIVE DISPOSITION

Indicate the recommended action(s) and agency(ies) that should be involved by marking 'X' in the appropriate boxes.

RECOMMENDATION	MARK 'X'	ACTION AGENCY: EPA	STATE	LOCAL	PRIVATE
A. NO ACTION NEEDED -- NO HAZARD	X				
B. INVESTIGATIVE ACTION(S) NEEDED *(If yes, complete Section III.)*					
C. REMEDIAL ACTION NEEDED *(If yes, complete Section IV.)*					
D. ENFORCEMENT ACTION NEEDED *(If yes, specify in Part E whether the case will be primarily managed by the EPA or the State and what type of enforcement action is anticipated.)*					

E. RATIONALE FOR DISPOSITION

No on-site disposal

F. INDICATE THE ESTIMATED DATE OF FINAL DISPOSITION *(mo., day, & yr.)*	G. IF A CASE DEVELOPMENT PLAN IS NECESSARY, INDICATE THE ESTIMATED DATE ON WHICH THE PLAN WILL BE DEVELOPED *(mo., day, & yr.)*

H. PREPARER INFORMATION

1. NAME	2. TELEPHONE NUMBER	3. DATE *(mo., day, & yr.)*
Elizabeth M Shaver	(404) 881-2234	8-26-85

III. INVESTIGATIVE ACTIVITY NEEDED

A. IDENTIFY ADDITIONAL INFORMATION NEEDED TO ACHIEVE A FINAL DISPOSITION.

B. PROPOSED INVESTIGATIVE ACTIVITY *(Detailed Information)*

1. METHOD FOR OBTAINING NEEDED ADDITIONAL INFO.	2. SCHEDULED DATE OF ACTION *(mo, day, & yr)*	3. TO BE PERFORMED BY *(EPA, Contractor, State, etc.)*	4. ESTIMATED MANHOURS	5. REMARKS
a. TYPE OF SITE INSPECTION (1)				
(2)				
(3)				
b. TYPE OF MONITORING (1)				
(2)				
c. TYPE OF SAMPLING (1)				
(2)				

EPA Form T2070-4 (10-79)

Continue On Reverse

NUS CORPORATION AND SUBSIDIARIES		TELECON NOTE
CONTROL NO.	DATE: 11/10/88	TIME: 1046
DISTRIBUTION: To File		
BETWEEN: Benjy Kinman	OF: Kentucky Dept. of Fish & Wildlife	PHONE: (502) 564-3596
AND: Jeff Myers, NUS Corporation		

DISCUSSION:

Mr. Kinman said Harrods creek is heavily fished for catfish and bass. At the mouth of Harrods creek and the Ohio river there are several big marinas and restaurants. There are no industries using Harrods creek.

OVERSIZED

DOCUMENT

MAP

4.25

DEPARTMENT OF THE INTERIOR
UNITED STATES GEOLOGICAL SURVEY

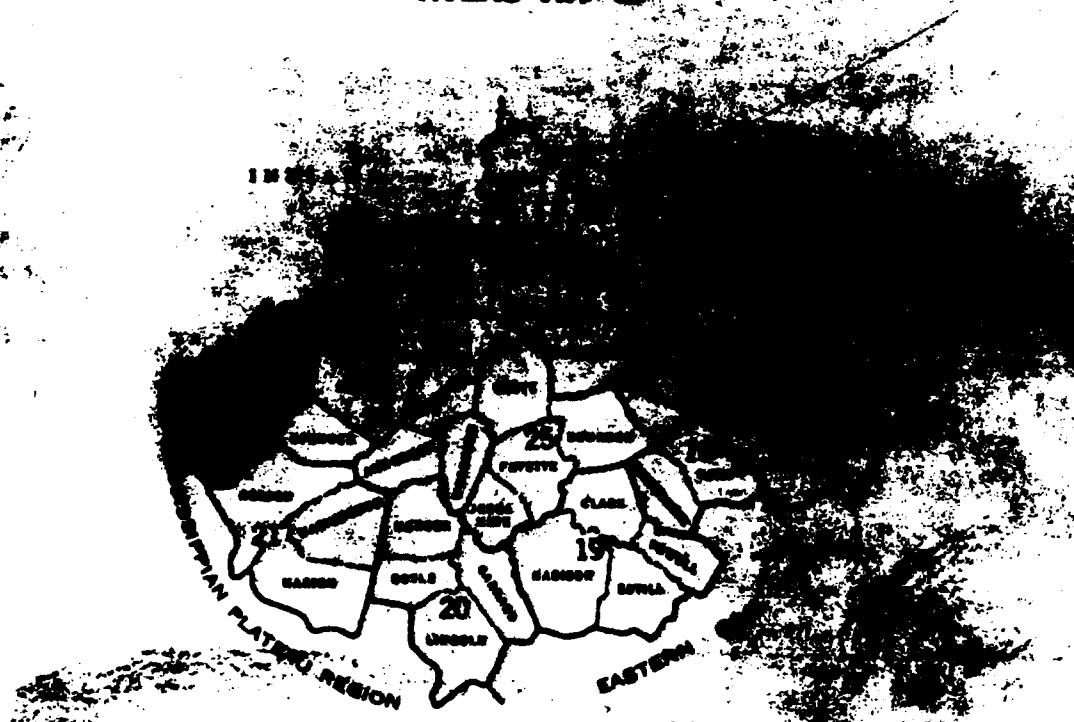
PREPARED IN COOPERATION WITH
THE COMMONWEALTH OF KENTUCKY
DEPARTMENT OF ECONOMIC DEVELOPMENT
AND THE KENTUCKY GEOLOGICAL SURVEY
UNIVERSITY OF KENTUCKY

AVAILABILITY OF GROUND WATER IN BULLITT, JEFFERSON AND OLDHAM COUNTIES, KENTUCKY

By

W. N. Palmquist, Jr., and F. R. Hall

HYDROLOGIC INVESTIGATIONS
ATLAS HA-



INDEX MAP OF THE BLUE GRASS REGION, KENTUCKY, SHOWING COUNTY GROUPS AND AREA OF THIS ATLAS

This is 1 of 11 atlases (HA-15 to HA-25) showing the geology and availability of ground water in the Blue Grass region, Kentucky. U. S. Geological Survey Water-Supply Paper 1533 contains a text description and illustrations providing further information on the occurrence and quality of the ground water in the Blue Grass region.

HA-22

SOIL SURVEY OF OLDHAM COUNTY, KENTUCKY

By Orville J. Whitaker, Soil Conservation Service

Soils surveyed by James F. Fehr, Herman P. McDonald, and Orville J. Whitaker, Soil Conservation Service

United States Department of Agriculture, Soil Conservation Service, in cooperation with the Kentucky Agricultural Experiment Station

Oldham County is in the north-central part of Kentucky (See opposite page) and has a population of 16,200. LaGrange, the county seat, has a population of 2,200. The county has a total area of 117,500 acres, or approximately 183.6 square miles.

The county is in the Bluegrass Land Resource Area (4). The Ohio River has cut a deep gorge along the northwestern boundary and serves as a county line with Clark County, Indiana. The northeastern portion of the county is dissected by Eighteen Mile Creek and Pattons Creek and their tributaries. Floyds Fork and Harrods Creek and their tributaries dissect the central and southern portions of the county from east to west. Elevation of the land ranges from about 430 feet along the Ohio River to about 900 feet, north of U. S. Highway 42, about 3 miles west of the Trimble County line.

General Nature of the County

This section gives general information concerning the county. Climate, settlement, natural resources, geology, and farming are discussed in it.

Climate

In Oldham County, summers are hot in valleys and slightly cooler in the hills; winters are moderately cold. Rains are fairly heavy throughout the year, with a slight peak in spring. Snow falls nearly every winter, but the snow cover usually lasts only a few days.

Table 1 presents data on temperature and precipitation for the county recorded at Louisville for the period 1951 to 1974. In table 2 are probable dates of the first freeze in fall and the last freeze in spring. Table 3 provides data on length of the growing season.

In winter the average temperature is 36 degrees F, and the average daily minimum is 27 degrees. The lowest temperature on record, -20 degrees, occurred at Louisville on January 24, 1963. In summer the average temperature is 76 degrees, and the average daily maximum is 86 degrees. The highest temperature, 105 degrees, was recorded on July 14, 1954.

"Growing degree days" shown in table 1 are equivalent to heat units. Beginning in spring, growing degree days accumulate by the amount that the average temperature each day exceeds a base temperature (50 degrees F). The normal monthly accumulation is used to schedule single or successive plantings of a crop between the last freeze in spring and the first freeze in fall.

Of the total annual precipitation, 22 inches, or 51 percent, usually falls during the period April through September, which includes the growing season for most crops. Two years in ten, the April-September rainfall is less than 18 inches. The heaviest 1-day rainfall during the period of record was 6.97 inches at Louisville on March 9, 1964. Thunderstorms number about 45 each year, 22 of which occur in summer.

Average seasonal snowfall is 18 inches. The greatest snow depth at any one time during the period of record was 11 inches. On the average, 7 days have at least 1 inch of snow on the ground, but the number of days varies greatly from year to year.

The average relative humidity in midafternoon is about 55 percent. Humidity is higher at night in all seasons, and the average at dawn is about 80 percent. The percentage of possible sunshine is 65 percent in summer and 45 percent in winter. The prevailing direction of the wind is from the south. Average windspeed is highest in spring—10 miles per hour.

Settlement

Oldham County was formed in 1832 from territory taken from Jefferson, Shelby, and Henry Counties. It was named for Colonel William Oldham, a native Virginian who was an officer in the Revolutionary War.

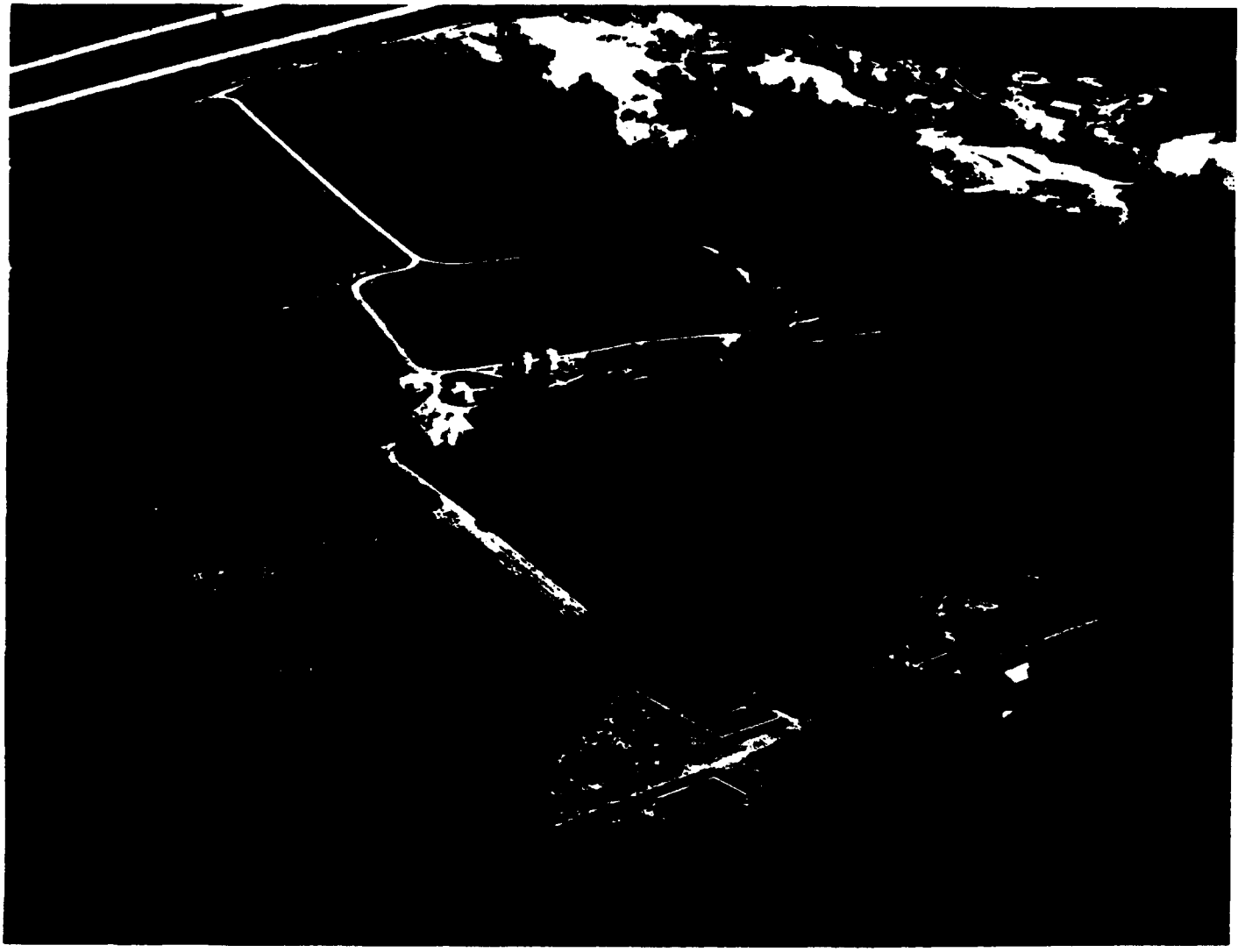
LaGrange, the county seat, was named for the French estate of General Lafayette. It was formerly called Lick Branch, but was renamed LaGrange and incorporated in 1840.

The first county seat of Oldham County was at Westport, which is on the Ohio River. In the steamboat era, the town became a thriving Ohio River port for shipping farm produce and receiving merchandise from the West.

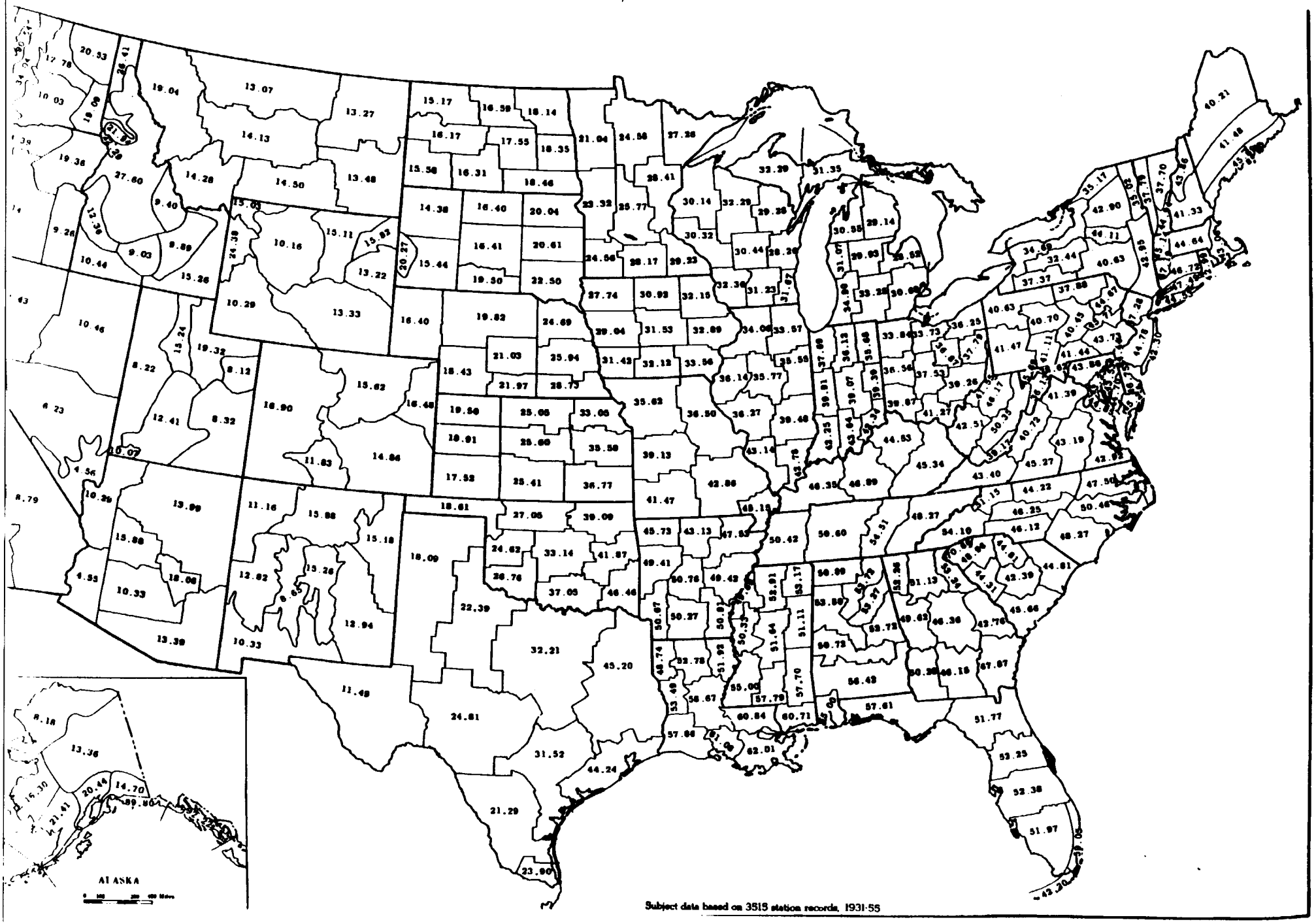
REFERENCE 10

SOIL SURVEY OF

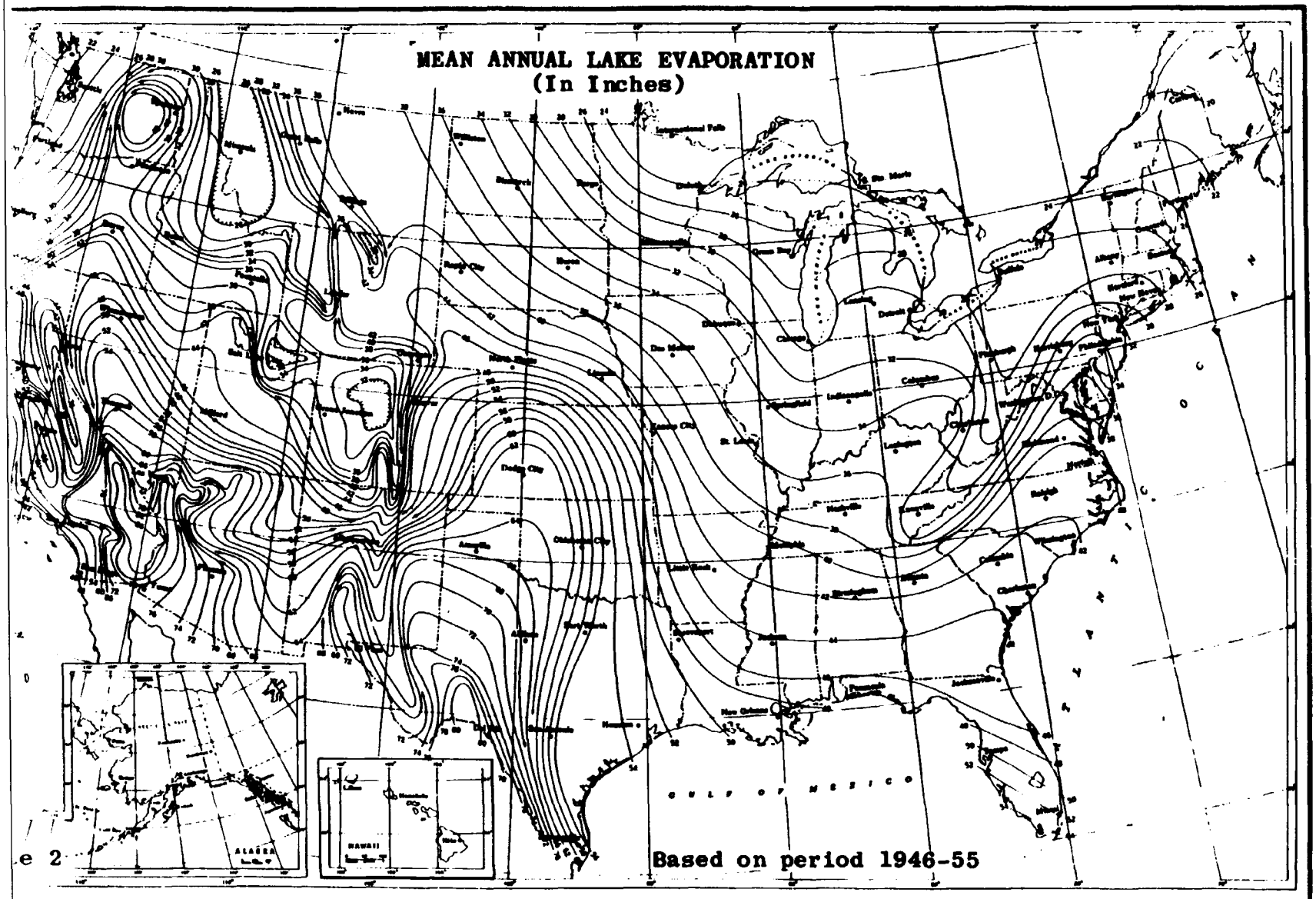
Oldham County, Kentucky

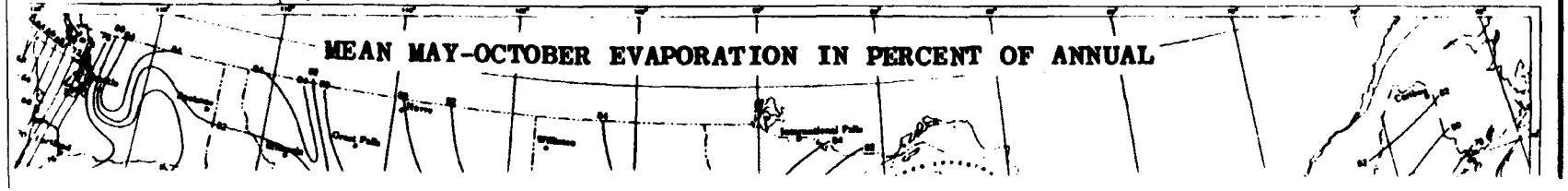


United States Department of Agriculture
Soil Conservation Service
In cooperation with
Kentucky Agricultural Experiment Station

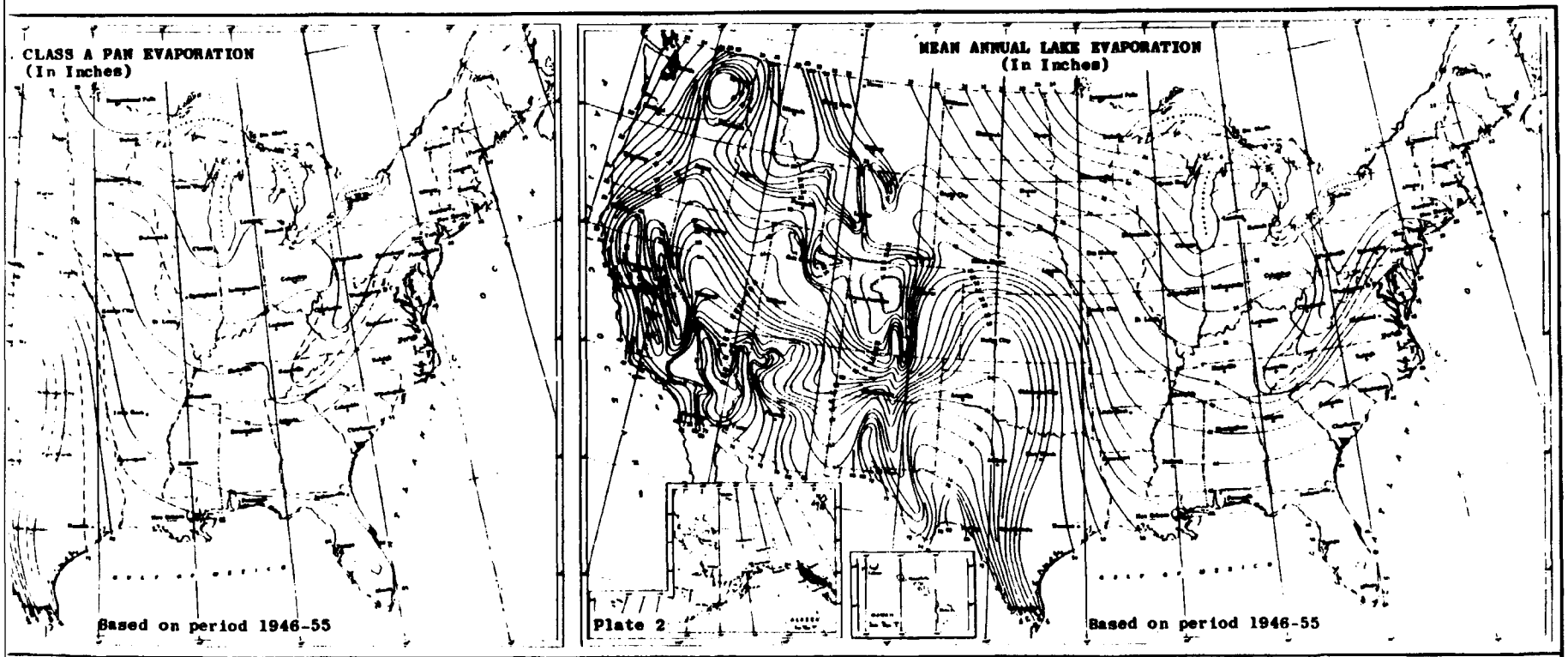

ALASKA
Subject data based on 3515 station records, 1931-55

EVAPORATION





MEAN PAN AND LAKE EVAPORATION



U.S. DEPARTMENT OF COMMERCE
C. R. Smith, Secretary

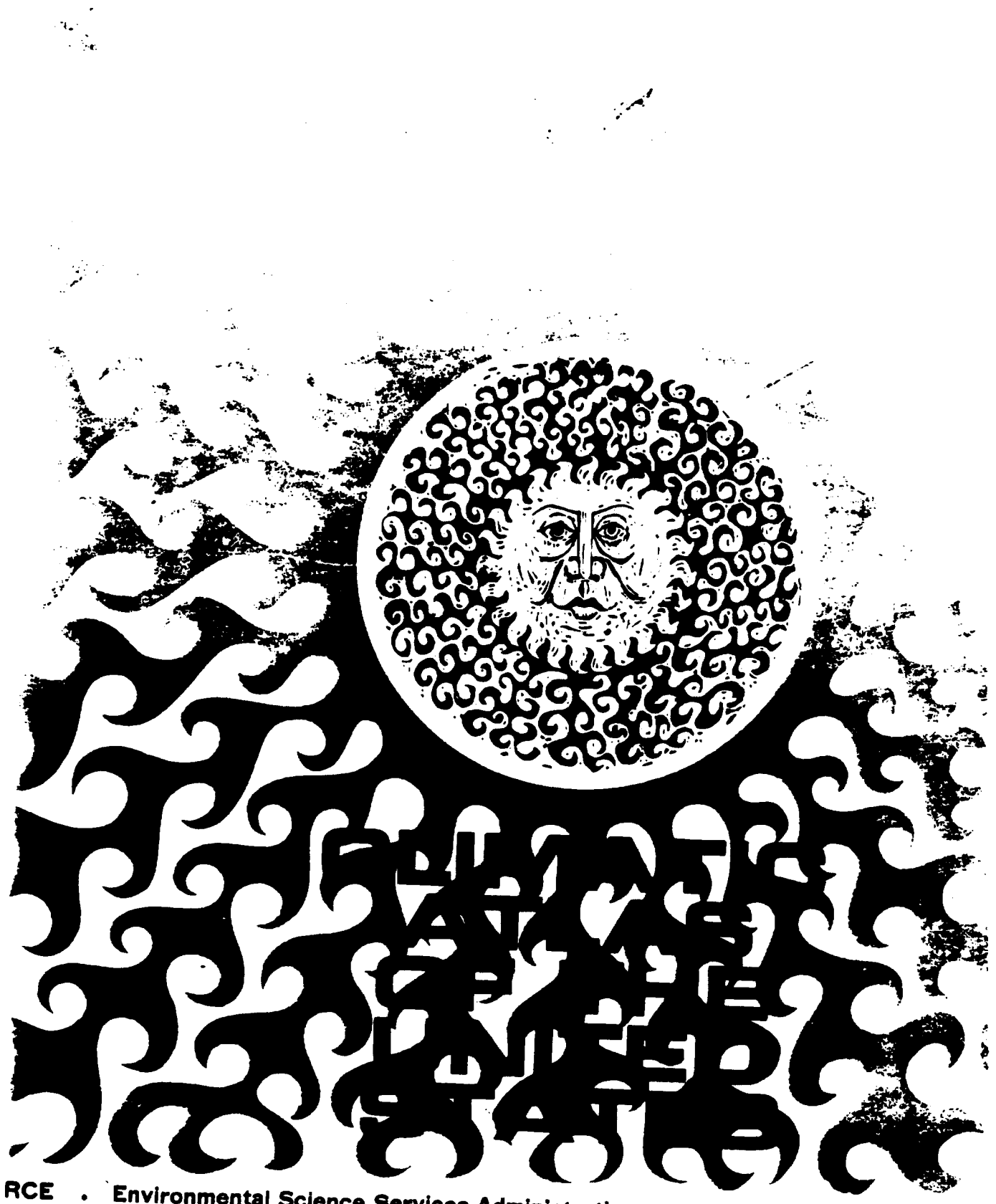
ENVIRONMENTAL SCIENCE SERVICES ADMINISTRATION
Robert M. White, Administrator

ENVIRONMENTAL DATA SERVICE
Woodrow C. Jacobs, Director

JUNE 1968

REPRINTED BY THE
NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION
1983

For sale through the National Climatic Data Center, Federal Building, Asheville, N.C. 28801, Attn: Publications.



RCE . Environmental Science Services Administration . Environmental Data Servic

FAVORABLE AND UNFAVORABLE CONDITIONS FOR OBTAINING GROUND WATER

Large supplies of ground water can be obtained in many places from thick deposits of alluvium in the Ohio River valley. For the largest yield, wells should be located near the river, as much of the recharge to the alluvial aquifer is from the river and because highly mineralized water has been found in some wells drilled near the valley walls.

The alluvium of the Kentucky River and Licking River valleys, although generally finer grained than that of the Ohio River valley, contains some lenses of coarse sand and gravel. Adequate domestic supplies can be obtained generally in the lower reaches of these valleys. Coarse sand or gravel may yield as much as several hundred gallons per minute in places.

The most favorable localities for obtaining ground water in the bedrock are those where thick limestone beds containing little or no shale occur at and below stream level. Parts of the High Bridge and Lexington groups and the Cynthiana formation of the Inner Blue Grass and the limestone of Silurian and Devonian age of the western part of the Outer Blue Grass meet these conditions. Wells are less successful where shale, bentonite, or relatively insoluble limestone occurs at shallow depths. Most wells are successful where thick pure limestone underlies broad ridges or uplands.

Where bedrock consists of alternating relatively thin limestone and shale beds, the chance of obtaining an adequate ground-water supply is considerably decreased. Parts of the Cynthiana formation and Eden group and the Maysville and Richmond groups are characterized by rocks of this type.

In areas where limestone is underlain by relatively impermeable rocks that inhibit deeper percolation of water, solution has been concentrated at the base of the limestone, resulting in lateral extension and enlargement of solution channels above the impermeable rock. Most wells that penetrate thick pure limestone beds before reaching shale will be successful, except near valleys where the limestone is drained. Many of the large springs of the region issue at such horizons. In areas where limestone is overlain by shale, little recharge is available to the limestone, and there has been little or no solutional enlargement of existing openings. Very few wells will obtain an adequate or dependable water supply beneath a layer of shale.

In areas underlain by shale, water reaching the water table moves at shallow depths in weathered shale to points of lower elevation. The resistance of the shale to disintegration by water is relatively

uniform, and the water is directed by the form of the surface on which it flows, thus being concentrated beneath valleys or other topographic depressions. Some wells drilled in valleys underlain by shale will be successful. Most wells on hillsides and ridgetops underlain by shale will be failures.

Rocks of Mississippian and Pennsylvanian age, composed of limestone, siltstone, shale, and sandstone, form many of the knobs and most of the escarpment surrounding the Blue Grass region. Little water is available to wells in rocks of those types where they occur on the sides or tops of the knobs or where they are exposed on the face and steep hillsides of the escarpment. Where they underlie broad ridges, uplands, or broad stream valleys, they may yield adequate domestic supplies.

The occurrence of ground water in geologic units is described on the generalized columnar sections that accompany the geologic and ground-water-availability maps in U.S. Geological Survey Hydrologic Investigations Atlases HA 15–25 (see Palmquist and Hall, 1960a–f; and Hall and Palmquist, 1960a–e).

METHODS OF OBTAINING GROUND WATER

SPRINGS

Springs have played an important role in the development of the Blue Grass region. Many towns, distilleries, and farm homes were located to be near perennial springs. In recent years the yield of many of the springs has become inadequate for current needs, owing to excessive demand, improper development, or lack of maintenance.

Although springs still are used by a few distilleries and some towns, the most widespread use is for stock and domestic water supply. Many springs throughout the region are not utilized. With proper development they would provide additional and, in many places, much needed supplies of water.

Springs can be developed by a number of methods, and each spring requires a unique installation to suit the local environment. The most important factor in development is that the flow of water from the mouth of the spring must be unimpeded. Damming or ponding of the water to a level higher than the mouth will allow sediment to collect and may clog the spring. To prevent clogging, the outlet of any pool or basin must be lower than the lowest point of the natural outlet.

An undeveloped spring should be cleaned of all debris and sediment around the mouth to insure a free flow of water. Surface drainage should be diverted from the spring to avoid contamination and turbidity. The collecting basin or sump should be cleaned periodically

TABLE 2.—*Spring-discharge measurements, in gallons per minute*

(Aquifer: Ot, Tyrone limestone; Ob, Benson limestone; Ol, Lexington group; Sb, Brassfield limestone; Sla, Laurel dolomite)

County	Aquifer	Spring 1947	Fall 1953	Spring 1954	Fall 1954	Fall 1955
Bath	Sb				2	2
Fayette	Ol	3,460	95		924	40
Do	Ol	185	24		50	48
Do	Ol	804	82		145	57
Jessamine	Ot			428	105	43
Do	Ot			125		4
Do	Ob			46		
Nelson	Sla				4	
Do	Sla				1	
Scott	Ol	1,350	8	73	23	20
Do	Ol				457	359
Woodford	Ol				12	1
Do	Ol					

Exceptions to this relation are found: (1) In areas where the original subsurface drainage pattern has been altered by piracy or ponding. Such areas constitute a small part of the Blue Grass region; they are generally underlain by rocks of relatively uniform high solubility; (2) In areas where topographic highs are underlain by rocks that are significantly more soluble than the rocks beneath adjacent topographic lows. Such areas normally have springs on hillsides near the contact of rocks of different solubilities. The water held up in the soluble zone may be discharged so rapidly through the springs that during dry periods this zone may contain little water.

In most places, solution openings are more extensively developed beneath the valleys than beneath the ridges. Therefore, more of the wells drilled in valleys are successful than those drilled on the ridgetops. Plate 2 shows the relation of items of well data gathered in the inventory. For example: Of 250 wells in bedrock in valley bottoms, only 16, or 6 percent, were inadequate for domestic use, whereas 19, or 35 percent, of 54 wells on hilltops were inadequate for domestic use.

In most of the Blue Grass region, the area of recharge for any well is confined to the surface area that drains to the site of the well. Exceptions are found in a small part of the region underlain by thick limestone where large solution channels may conduct water in directions other than the direction of the surface drainage. In those areas, where underground drainage does not accord with surface drainage, it may be difficult to determine the course and direction of movement of ground water. However, in most places alinement of sinkholes or depressions on the surface indicates the alinement of underground watercourses, but not the direction of flow.

[Aquifer: Ol, Lexington group: Ocy, Cynthiana formation; Om, Maysville group; S, Silurian system; Qal, Quaternary alluvium]

County	Date	Aquifer	Average pumping rate (gpm)	Specific capacity (gallons per minute per foot for indicated length of test)								
				1 hour	2 hours	3 hours	4 hours	6 hours	8 hours	12 hours	24 hours	48 hours
Boone		Qal	210									
Bourbon	May 26, 1954	Ocy	41	23							28	
Boyle		Ol	50									
Crumbeil	Oct. 19, 1951	Qal	305				[1] 35					[1] 8.3
Do	June 13, 1952	Qal	325				[1] 31					
Do	July 13, 1954	Qal	310				19					
Do	Aug. 3, 1951	Qal	496				[1] 87					
Do	Sept. 4, 1952	Qal	475				77					
Do	Nov. 25, 1953	Qal	348				[1] 64					
Do	Sept. 10, 1954	Qal	310	57	36							
Carroll	1945	Qal	600							[1] 27		
Do	Sept. 9, 1954	Qal	630		26							
Fayette	June 3, 1954	Ocy	65				7.3					
Do	June 8, 1954	Ocy	280				3.9			6.2	3.7	3.0
Do	Sept. 29, 1954	Ocy	190	1.9			1.7	1.6				
Do	Sept. 30, 1954	Ocy	213	1.8	1.4		1.3			3.8		
Do	June 17, 1954	Ocy	24		1.4		1.4					
Do	June 6, 1954	Ocy	310				7.6	6.4			.4	
Do	June 13, 1954	Ocy	67		8.8		7.4					[1] 5.2
Do	Sept. 28, 1954	Ocy	213	21	20					8.6		
Do	Sept. 30, 1954	Ocy	213	14	13							
Do	Oct. 7, 1954	Ocy	82	7.8	6.8							
Do	Aug. 9, 1953	Ol	13		6.9							
Do	Sept. 9, 1954	Qal	250	[1] 21								
Garrard	Oct. 12, 1954	Ol	23	17				11				
Harrison	Oct. 15, 1954	Ol	150	1.3	1.3	1.3						
Do	1950	Ol								[1] 21		
Jefferson	Oct. 22, 1946	Qal	1,110	38	38	38	38	38	38	37	36	[1] 32
Do	Aug. 10, 1953	Qal	609									[1] 28
Jessamine	Oct. 13, 1954	Ol	68	4.7	4.2	4.9	4.8	4.9	4.9	4.9	4.6	
Kenton	Aug. 30, 1954	Qal	383	2.1	2.0							
Lewis	Sept. 14, 1954	Qal	383	[1] 36								
Mason		Qal	125									
Nelson	June 24, 1939	Qal	383	2.3	2.3	2.1	2.0	2.0	2.0	1.8	1.6	.9
Do	Oct. 12, 1954	Ol	22	1.1	1.0							
Do	June 24, 1939	Ol	22	2.3	2.0	1.8	1.7	1.6	1.6	1.5	1.7	.9
Do	do	Ol	8				.7	.6	.6	.6	.4	.3
Do	do	Ol	25	6.2	4.6	4.4	4.8	3.2	2.9	2.4	2.4	.7
Do	do	Ol	8	.1								
Powell	1954	Qal	83							[1] 1.7		
Robertson	May 25, 1954	Ol	83	[1] 19								
Woodford	Oct. 1, 1954	Ol	75	20	14							

[1] 14 hr.
[2] 5 hr.
[3] 13 hr.
[4] 14 hr.
[5] 1.5 hr.
[6] 16 hr.
[7] 240 hr.
[8] 224 hr.
[9] 0.5 hr.

naterial, such as gravel, sand, and silt, the openings consist of spaces (pores) between individual particles or grains. The amount of open space (porosity) and the size and interconnection of the openings, which together determine permeability, are determined by the size, shape, and arrangement of the grains. In consolidated clastic rocks, such as sandstone, siltstone, or shale, openings also occur between the grains, but the porosity and permeability are reduced to a greater or lesser extent by cementing material. The amount of cementing material may range from almost nothing to enough to fill the openings completely. In carbonate rocks, such as limestone, the principal openings are usually secondary and exist as a result of solution along joints and bedding planes. These openings generally are larger and more numerous near the surface and decrease in size and number with depth. The size of the openings and the depth to which they extend are determined essentially by the relative solubility of the rock and by the amount of water that has been in contact with the rock. Solution openings are largest and extend to greatest depths in thick, relatively pure limestone; they are confined to shallower depths where layers of shale, bentonite, or impure limestone serve as effective barriers below which the process of solution is ineffective. Types of limestone that are relatively insoluble include those which contain significant amounts of impurities such as clay (argillaceous limestone), magnesium carbonate (dolomitic limestone), or silica (siliceous limestone).

In the Blue Grass region ground water occurs in two distinct environments. One includes unconsolidated sand and gravel in the valleys of the Ohio River and the larger tributaries; the other consists of the consolidated bedrock that underlies the entire region.

Although the unconsolidated alluvial deposits cover only a small part of the region (Walker, 1957), they are not only the source of much of the ground water presently pumped, but they also are the greatest potential source of ground water for future municipal and industrial development. Almost everywhere the alluvium of the Ohio Valley will yield sufficient water for domestic and farm use, and in many places it will yield several hundred to 1,000 gpm (gallons per minute) and in a few places more than 1,000 gpm. The largest known yield is 1,400 gpm to a well near Louisville. Specially designed wells or collectors may be able to produce several thousand gallons per minute from the alluvium. One such collector, downriver from the Blue Grass region, has been pumped at a rate of 9,000 gpm (Maxwell, 1954). Such large quantities are replenished largely by induced infiltration from the river. Alluvium in the valleys of the larger

tributaries yields, in some places, several hundred gallons of water per minute, as well as adequate supplies for domestic needs in most places. Alluvium in the smaller tributaries is generally thin and mostly silt and clay. Small amounts of water may be obtained from the thin deposits of alluvium, but few wells are known that obtain water from this source.

The only wells in bedrock that produce more than 100 gpm are those that penetrate rocks of Middle Ordovician age in the Inner Blue Grass area and a few that penetrate younger rocks in the Ohio River valley. Otherwise in younger rocks, only 2 wells produce more than 50 gpm and only 7 more than 25 gpm.

Of the 608 inventoried wells drilled in bedrock, 238 are known to produce enough water for modern domestic use with a power-pump and pressure system. About half the 284 wells equipped with hand pumps might furnish enough water for a power-pump and pressure system. Therefore, roughly 375, or three-fifths, of the wells in bedrock that were inventoried are thought to be capable of providing a modern domestic supply. The writers were told of many "dry holes" but did not inventory these, and no doubt many more have been abandoned and forgotten. Less than a quarter of the wells in bedrock that were inventoried are reported to go dry on occasion or are of such small yield as to be inadequate for any purpose. Nevertheless, considering the dry holes that were not inventoried, it is estimated that less than half the attempts to obtain adequate domestic water supplies from wells drilled in bedrock have been successful.

Locally, as much as 300 gpm is obtained from a few wells in bedrock. The specific capacity of 17 wells in alluvium and 23 wells in bedrock was determined and is shown in table 1. Table 2 shows the measured discharge of 13 springs.

Thick beds of pure limestone underlie parts of the Blue Grass region at depths greater than about 100 feet below the land surface. However, they are covered by essentially impermeable rock in most places. As a result, circulation of ground water in those areas has been restricted to a zone above the impermeable rock units, extending little more than 100 feet beneath the land surface. Solution openings at greater depths are so small that they have little or no effect on the occurrence of ground water.

The availability of ground water in a part of the Inner Blue Grass is closely related to topography and drainage (Hamilton, 1950). Other things being equal, more water is available from rocks beneath valleys than from rocks beneath hills. This relation is apparent not only in the remainder of the Inner Blue Grass where similar topographic and geologic conditions exist, but also in the entire Blue Grass under a wide range of geologic and topographic conditions.

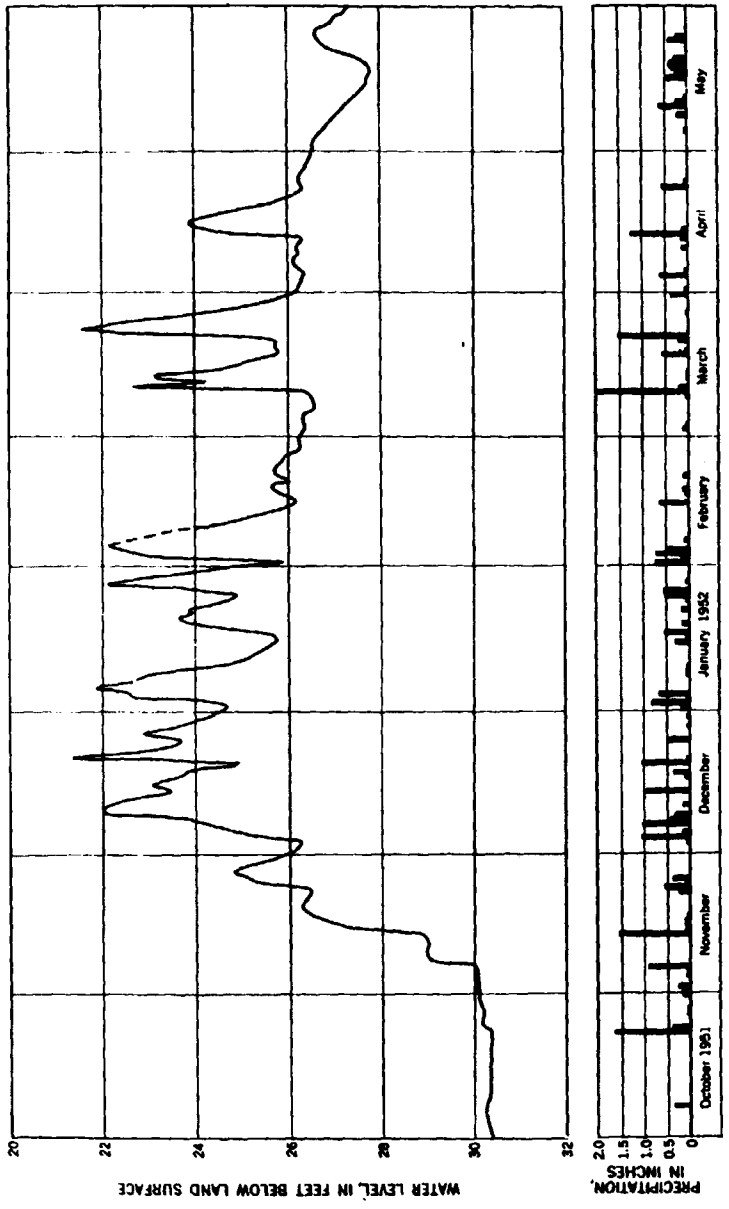


FIGURE 7.—Graph showing relation between water level in a well and precipitation near Covington, Ky.

Figure 8 is a hydrograph of a well in a semiconfined aquifer in Lower Mississippian shale and siltstone. The trace shows short-term drawdown and recovery resulting from intermittent pumping of a nearby well. The large recovery from the 16th to the 19th day was due to recharge from rainfall. The small upward fluctuations were caused by the weight of trains that passed the well about 300 feet away and temporarily compressed the aquifer, causing water to rise in the well.

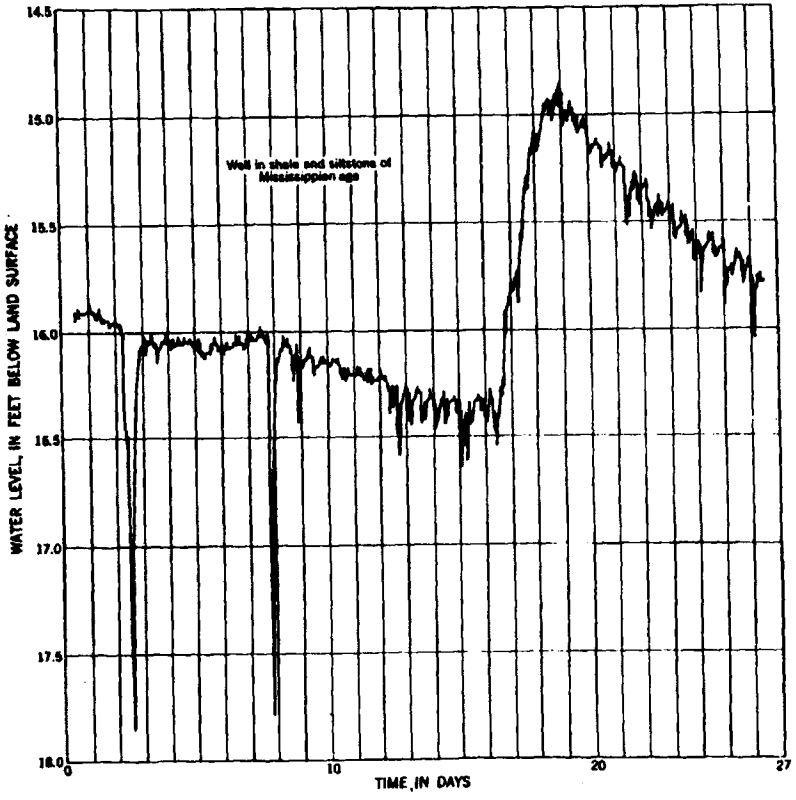


FIGURE 8.—Graph showing water level in a well near Morehead, Ky.

GROUND-WATER OCCURRENCE

Ground water occurs in openings in both consolidated and unconsolidated rocks. The nature of the openings controls the amount of water that can be stored in the rocks and the rates at which it can be replenished, or given up, to wells and springs. In unconsolidated

rocks of Silurian and Middle Devonian age underlie long, wide valleys extending into the Knobs. Upper Devonian and Lower Mississippian rocks make up the hillsides and most of the hilltops of the rough, hilly belt of the Knobs proper.

Rocks of Late Mississippian age crop out in the Knobs along the west and south edges of the area. These rocks are outliers of the Mississippian Plateau. Rocks of Early Pennsylvanian age crop out in the Knobs along the east edge of the area, mainly on the tops of hills and ridges. These rocks are outliers of the Eastern Coal Field.

The alluvial terraces of the Ohio River valley lie along the entire north border of the Blue Grass region. The valley is cut about 350 feet below the general level of the adjacent area. The part of the Ohio River valley to be considered in the present report consists of the alluvial terraces on the Kentucky side of the Ohio River. The width of the terraces ranges from zero, where the river impinges on the valley walls, to a maximum of about 5 miles, near Louisville.

The entire Blue Grass region lies within the drainage basin of the Ohio River. The important tributaries of the Ohio that drain the region are the Kentucky, Licking, Salt, Cumberland, and Green Rivers. The Kentucky River drains an area of about 3,700 square miles, or 33 percent of the Blue Grass region as defined. It enters the region in the southeast in Estill County, flows westward to Jessamine County, and then northward to the Ohio River at Carrollton. The Kentucky River is incised as much as 300 feet below the general upland level and has cut a steep, narrow gorge where it crosses the Cincinnati arch. The Licking River enters the area in the east in Rowan County and flows northwestward to the Ohio River at Covington and Newport. It drains 2,900 square miles, or 25 percent of the Blue Grass region. It has cut a valley as much as 300 feet below the upland level, but it has a wider valley and flood plain than the Kentucky River and nowhere is entrenched in a steep, narrow valley. The Salt River heads in Boyle County, flows northward to Anderson County, and thence westward to the Ohio River at West Point, south of Louisville. The Salt River drains about 2,670 square miles, or 24 percent of the area. About 160 square miles in Lincoln County in the extreme southern part of the region is drained by the Cumberland and Green Rivers, which join the Ohio River in western Kentucky. A narrow strip of land along the Ohio River is drained by small directly tributary streams.

The subsurface drainage pattern is composed of many small independent units much like the surface drainage, which is made up of many small watersheds. In areas underlain by limestone, subsurface

drainage courses may deviate locally from the surface drainage. Suc deviations usually are evident from discontinuities in the surfac drainage pattern.

CLIMATE

The climate of the Blue Grass region is of the humid continenta type, with sharp contrasts between the winter and summer. Th mean annual temperature ranges from 53° to 57° F., 55° F. bein about average for the region. The mean January temperature range from 32° to 37° F. and averages about 34° F. The mean July temper ature ranges from 75° to 78° F. and averages about 76° F. The grow ing season is about 180 days. The mean annual precipitation range from 39 to 47 inches and averages about 43 inches. Precipitation i rather evenly distributed throughout the year, there being sufficien rain during the growing season in most years to cause crops to matur The spring months sometimes have enough rain to produce floods; ye in contrast, drought conditions occasionally prevail for several week during the summer.

Figure 3 consists of two graphs showing the monthly temperatur and precipitation averaged for 10 stations in the Blue Grass region.

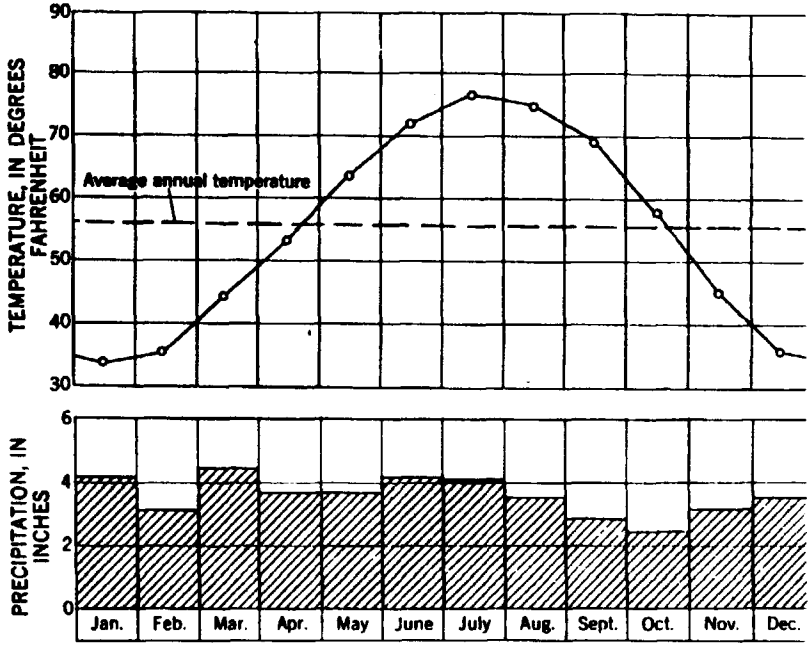


FIGURE 3.—Monthly temperature and precipitation averaged from normals for 10 station in the Blue Grass region.

Geologic mapping was restricted largely to part of Rowan County, where no geologic map was available. There the geologic boundaries were drawn on the basis of available well logs and a reconnaissance field study. Additional geologic mapping was done in several counties where the existing maps did not distinguish some of the more important water-bearing strata. Most of the geology shown on the maps, however, has been adapted from existing county geologic maps prepared by the Kentucky Geological Survey. The geologic maps are included in U.S. Geological Survey Hydrologic Investigations Atlases HA 15–25 (see Palmquist and Hall, 1960a–f; and Hall and Palmquist, 1960a–e). References to the original county maps appear in the atlases.

ACKNOWLEDGMENTS

The reconnaissance was aided greatly by the cooperation and interest of well owners, well drillers, county agents, and United States Soil Conservation Service employees in the region.

Dr. A. C. McFarlan, former director of the Kentucky Geological Survey, aided materially in the compilation of the stratigraphic correlation chart of the region.

GEOGRAPHY

The Blue Grass region proper consists of the Inner Blue Grass, Eden shale belt, and Outer Blue Grass physiographic subdivisions. However, for the purpose of this report it is defined to include also the Knobs and small parts of the Eastern Coal Field and Mississippian Plateau. Most of the region lies in the Lexington Plain section of the Interior Low Plateaus physiographic province (Fenneman, 1938). Figure 2 shows physiographic subdivisions and the outer limits of the area of this report as determined by county boundaries.

TOPOGRAPHY AND DRAINAGE

The central part of the Blue Grass region as shown in figure 2 coincides, for the most part, with what is known as the Inner Blue Grass and consists of the outcrop areas of the Cynthiana formation (Ordovician) and older Ordovician strata. The area is a gently rolling upland in which the Kentucky River and some of its tributaries are entrenched as much as 300 feet. Most of the rock underlying the area is limestone that has been subjected to considerable erosion by solution, both on and beneath the surface. As a result, much of the drainage is underground. In places the underground drainage comes to the surface to form springs. The area is dotted with sinkholes as much as 60 feet deep and 1 square mile in area.

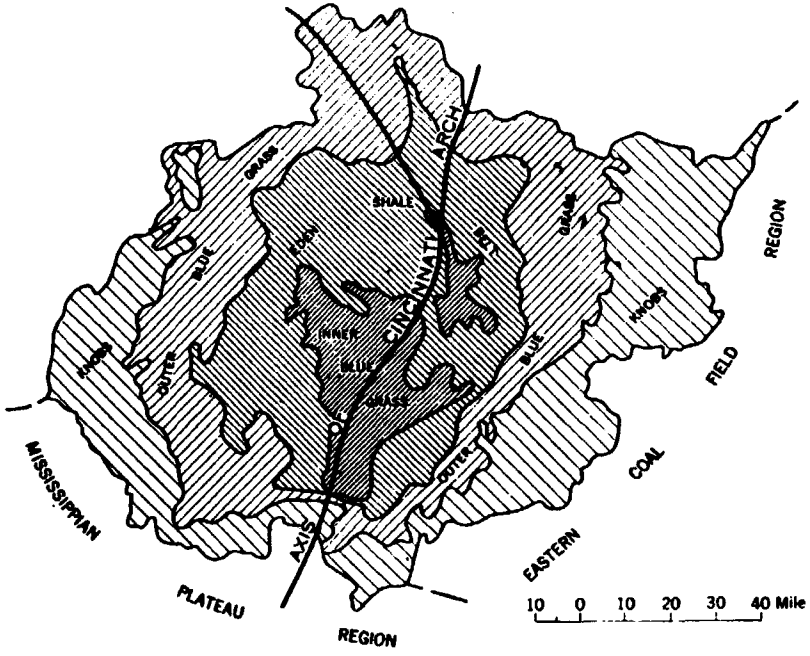


FIGURE 2.—Physiographic subdivisions of the Blue Grass region, Kentucky, and location of the Cincinnati arch.

The Inner Blue Grass is surrounded by a band of dissected, hilly country known as the Eden shale belt. The Eden shale belt consists of the outcrop area of the Eden group of Ordovician age, which is made up mainly of shale and interbedded thin layers of limestone and is characterized by sharp, irregular ridges and narrow valleys. Because of the steep slopes, runoff is rapid, and few perennial streams originate in the Eden shale belt.

The Outer Blue Grass surrounds the Eden shale belt. The Outer Blue Grass consists of the outcrop areas of the Richmond and Maysville groups of Ordovician age and part of the outcrop area of rocks of Silurian age. These rocks are chiefly limestone but include considerable interbedded shale. The topography is gently rolling except near major streams, where it is dissected and rugged. There has been some subsurface solution, and small sinkholes are fairly common but most of the drainage is on the surface.

Bordering the Outer Blue Grass on the east, south, and west is a belt, known as the Knobs, which is underlain by rocks of Silurian, Devonian, and Early Mississippian ages. The outcrop of Silurian and Devonian rocks west of the Cincinnati arch is gently rolling and more or less continuous with the Outer Blue Grass. East of the arch

CONTENTS

UNITED STATES DEPARTMENT OF THE INTERIOR

STEWART L. UDALL, *Secretary*

GEOLOGICAL SURVEY

Thomas B. Nolan, *Director*

For sale by the Superintendent of Documents, U.S. Government Printing Office
Washington 25, D.C.

Reference No. 8

Reconnaissance of Ground-Water Resources in the Blue Grass Region Kentucky

By W. N. PALMQUIST, JR., and F. R. HALL

GEOLOGICAL SURVEY WATER-SUPPLY PAPER 1533

Prepared in cooperation with the Commonwealth of Kentucky, Department of Economic Development and the Kentucky Geological Survey, University of Kentucky

UNITED STATES GOVERNMENT PRINTING OFFICE, WASHINGTON : 1961

LOGBOOK REQUIREMENTS
REVISED - JANUARY 6, 1988

NOTE: ALL LANGUAGE SHOULD BE FACTUAL AND OBJECTIVE

1. Record on front cover of the Logbook:

   TDD No., Site Name, Site Location, Project Manager

2. All entries are made using ink.
3. Provide statement referencing Equipment Location Log.
4. Statement of Work Plan, Study Plan, and Safety Plan discussion and distribution to field team with team member signatures.
5. Sign and date each page. Project Manager is to review and sign off on each logbook daily.
6. A single line is drawn through error. Each correction is dated/initialed.
7. Report weather conditions. Provide general site description and remarks.
8. Document all changes from project planning documents.
9. Provide a site sketch with sample locations.
10. Document all calibration and pre-operational checks of equipment.
11. Provide reference to Sampling Field Sheets for detailed sampling informaiton.
12. Maintain photo log by completing the stamped information at the end of the logbook.
13. If no site representative is on hand to accept the receipt for samples an entry to that effect must be placed in the logbook.

Discussed work Plan with Mark Adams

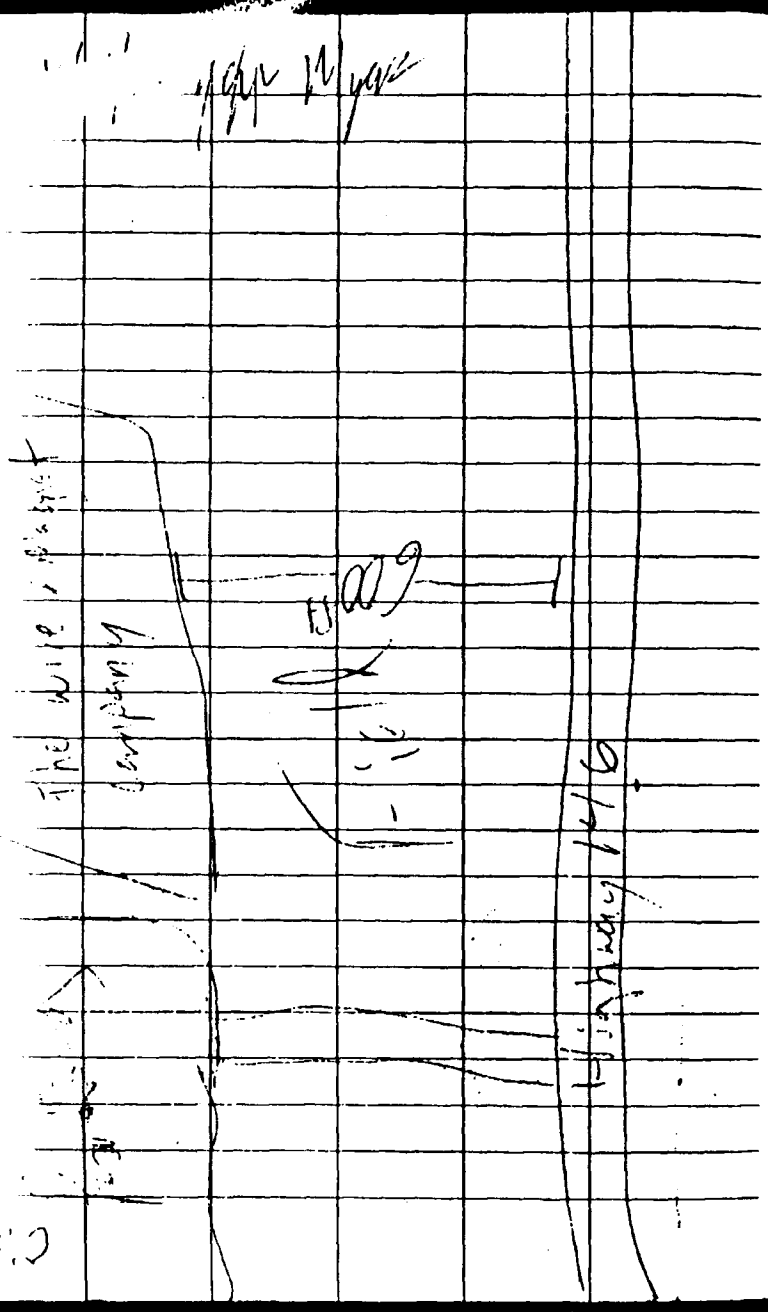
1330 Met with Fred Smith with LaGrange Water Dept. He said they mainly cover city limits and Ohio Oldham water Dept. covers the majority of the area.

LaGrange water lines cover about 1533 meters.

Alot of residents use systems and they also have water hauled.

1400 Went to Ohio Oldham Water Dept. and talked to Mrs. Nancy Steele. She said they served approx. 3200 connection and the majority of our area of concern. (See Topo map for water lines) They have 5 wells in Westport and they sell water to LaGrange.

10/31/88 Jeff Myers



1530 Arrived at Anaconda. Area surrounding the site is other factories and industries

1545 Talked to resident nearest site. Mr. Clyde Parkenson. He uses a spring for his water. Fixing to hook to new City water lines.

10/31/88

REFERENCE 6

NUS CORPORATION AND SUBSIDIARIES		*TELECON NOTE*
CONTROL NO.	**DATE: November 4, 1988**	**TIME: 0912**

DISTRIBUTION:

To File

BETWEEN: Greg Lewis	**OF: LaGrange Health Department**	**PHONE: (502) 222-9466**

AND: Jeff Myers, NUS Corporation

DISCUSSION:

Mr. Lewis said most of the residences that do not have access to municipal water obtain their water from cisterns and springs. Very few, if any, private wells in the area due to a high sulfur content in the groundwater.

ACTION ITEMS:

Reference No. 7

WELL INVENTORY FORM

OWNER

Name & Address of Resident: Clyde Parkerson
(b)(6) Personal Privacy
(b)(6) Personal Privacy

Telephone

Spring

WELL INFORMATION

Approximate Location of Well: 2000 ft Northeast of site

Date Well Drilled _____ Driller or Installer _____

Depth of Well _____ Casing Type _____ Diameter _____

Screened Interval _____

Type of Pump _____ Pump Setting or Yield _____

Well Use _____ Number of Users _____

Any Tests Performed on Well _____

Any Problems Noted by Well Owner _____

Fixing to hook up to new city water lines

GENERAL INFORMATION

Approximate Distance to Site _____

Approximate Elevation _____

Estimated Static Water Level _____ Below Land Surface

Soil Type _____

Zone of Influence _____

Comments _____

NUS Representative: Jeff Myers

Date: 10/31/88

Continued From Front

III. INVESTIGATIVE ACTIVITY NEEDED and PART B - PROPOSED INVESTIGATIVE ACTIVITY *(Continued)*

d. TYPE OF LAB ANALYSIS (1)				
(2)				
e. OTHER *(specify)* (1)				
(2)				

C. ELABORATE ON ANY OF THE INFORMATION PROVIDED IN PART B *(on front & above)* AS NEEDED TO IDENTIFY ADDITIONAL INVESTIGATIVE WORK.

D. ESTIMATED MANHOURS BY ACTION AGENCY

1. ACTION AGENCY	2. TOTAL ESTIMATED MANHOURS FOR INVESTIGATIVE ACTIVITIES	1. ACTION AGENCY	2. TOTAL ESTIMATED MANHOURS FOR INVESTIGATIVE ACTIVITIES
a. EPA		b. STATE	
c. EPA CONTRACTOR		d. OTHER *(specify)*	

IV. REMEDIAL ACTIONS

A. SHORT TERM/EMERGENCY STRATEGY *(On Site & Off-Site)*: List all emergency actions needed to bring site under immediate control, e.g., restrict access, provide alternate water supply, etc. See instructions for a list of Key Words for each of the actions to be used in the space below.

1. ACTION	2. EST. START DATE *(mo,day,&yr)*	3. EST. END DATE *(mo,day,&yr)*	4. ACTION AGENCY *(EPA, State, Private Party)*	5. ESTIMATED COST	6. SPECIFY 311 OR OTHER ACTION; INDICATE THE MAGNITUDE OF THE WORK REQUIRED
				$	
				$	
				$	
				$	
				$	
				$	

B. LONG TERM STRATEGY *(On Site & Off-Site)*: List all long term solutions, e.g., excavation, removal, ground water monitoring wells, etc. See instructions for a list of Key Words for each of the actions to be used in the spaces below.

1. ACTION	2. EST. START DATE *(mo,day,&yr)*	3. EST. END DATE *(mo,day,&yr)*	4. ACTION AGENCY *(EPA, State Private Party)*	5. ESTIMATED COST	6. SPECIFY 311 OR OTHER ACTION; INDICATE THE MAGNITUDE OF THE WORK REQUIRED
				$	
				$	
				$	
				$	
				$	
				$	

C. ESTIMATED MANHOURS AND COST BY ACTION AGENCY

1. ACTION AGENCY	2. TOTAL EST. MANHOURS FOR REMEDIAL ACTIVITIES	3. TOTAL EST. COST FOR REMEDIAL ACTIVITIES	1. ACTION AGENCY	2. TOTAL EST. MANHOURS FOR REMEDIAL ACTIVITIES	3. TOTAL EST. COST FOR REMEDIAL ACTIVITIES
a. EPA			b. STATE		
c. PRIVATE PARTIES			d. OTHER *(specify)*		

CHARLOTTE E. BALDWIN
SECRETARY

MARTHA LAYNE COLLINS
GOVERNOR

COMMONWEALTH OF KENTUCKY
NATURAL RESOURCES AND ENVIRONMENTAL PROTECTION CABINET
DEPARTMENT FOR ENVIRONMENTAL PROTECTION
FORT BOONE PLAZA
18 REILLY ROAD
FRANKFORT, KENTUCKY 40601

MEMORANDUM

TO: Caroline P. Haight, Manager
Permit Reweiw Branch

THRU: Barry Burrus, Chief
Uncontrolled Site Section

FROM: Robert L. Prewitt, Environmental Program Coordinator
Uncontrolled Site Section

DATE: August 9, 1985

SUBJECT: Uncontrolled Site Closeout for Anaconda, Ind. Magnet Wire and Cable

The Anaconda, Ind. magnet wire and cable facility is located North of LaGrange, Kentucky in Oldham County. The facility manufactures various types of magnet wire and cables. From the process, a waste caustic wash solution is generated. Inclusion of the facility on the Region IV CERCLIS is due to the notification in 1980 of hazardous waste activity as a treatment, storage and disposal facility. In 1981, the Part A was officially withdrawn as a TSD facility, but the generator status was retained. In 1983, the facility's name changed to Anamag Limited.

The Dawkins Road Site in Oldham County presently has several drums with the Anaconda Industries name on them. There is no evidence of any other off-site disposal in the Division files. Conversations with the Louisville field office inspector indicates that the facility is in compliance and has had no on-site disposal. This facility is regulated by RCRA.

After reviewing information within the Division and completion of a preliminary assessment by Jim Jarman, I recommend this site receive no further action and be removed from the uncontrolled site list.

JJ/tlj

c: Marsha Swain
EPA ✓
File

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT

EPA

I. IDENTIFICATION
01 STATE: KY | 02 SITE NUMBER: D042943423

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site)	02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER				
ANACONDA IND. MAGNET WIRE & Cable	Highway 146 Box 29				
03 CITY	04 STATE	05 ZIP CODE	06 COUNTY	07 COUNTY CODE	08 CONG DIST
LA GRANGE	KY	40031	OLDHAM	185	04
09 COORDINATES LATITUDE: 38°25'09"	LONGITUDE: 085°20'32"				

10 DIRECTIONS TO SITE (Starting from nearest public road)
TAKE Highway 146 NORTH From LA GRANGE, Ky. about 1½ miles. Cross 1 SET of RAILROAD TRACKS AND TURN LEFT. The site is on the right. (SEE MAP.)

III. RESPONSIBLE PARTIES

01 OWNER (If known)	02 STREET (Business, mailing, residential)			
ANACONDA INDUSTRIES	4/4 MEADOW STREET			
03 CITY	04 STATE	05 ZIP CODE	06 TELEPHONE NUMBER	
Waterbury	CT.	06702	(312) 858-4000	
07 OPERATOR (If known and different from owner)	08 STREET (Business, mailing, residential)			
William Peterson	Highway 146			
09 CITY	10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER	
LA GRANGE	KY	40031	(502) 222-9415	

13 TYPE OF OWNERSHIP (Check one)
☒ A. PRIVATE ☐ B. FEDERAL: _____ (Agency name) ☐ C. STATE ☐ D. COUNTY ☐ E. MUNICIPAL
☐ F. OTHER: _____ (Specify) ☐ G. UNKNOWN

14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply)
☐ A. RCRA 3001 DATE RECEIVED: ___/___/___ (MONTH DAY YEAR) ☐ B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: ___/___/___ (MONTH DAY YEAR) ☒ C. NONE

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON SITE INSPECTION
☒ YES ☐ NO DATE 2 28 85 (MONTH DAY YEAR)
BY (Check all that apply)
☐ A. EPA ☐ B. EPA CONTRACTOR ☑ C. STATE ☐ D. OTHER CONTRACTOR
☐ E. LOCAL HEALTH OFFICIAL ☐ F. OTHER: _____ (Specify)
CONTRACTOR NAME(S): _____

02 SITE STATUS (Check one)
☒ A. ACTIVE ☐ B. INACTIVE ☐ C. UNKNOWN

03 YEARS OF OPERATION
1967 (BEGINNING YEAR) | Present (ENDING YEAR) ☐ UNKNOWN

04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED
WASTE Caustic wash solutions
waste varnish & solvents.

05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION
NONE

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents)
☐ A. HIGH (Inspection required promptly) ☐ B. MEDIUM (Inspection required) ☐ C. LOW (Inspect on time available basis) ☒ D. NONE (No further action needed, complete current disposition form)

VI. INFORMATION AVAILABLE FROM

01 CONTACT	02 OF (Agency/Organization)		03 TELEPHONE NUMBER	
MARSHA SWAIN	KNREPC - Division of Waste Management		(502) 564-6716	
04 PERSON RESPONSIBLE FOR ASSESSMENT	05 AGENCY	06 ORGANIZATION	07 TELEPHONE NUMBER	08 DATE
Jim Jarman	KNREPC	Div. Waste Mgt.	(502) 564-6716	08 02 85 (MONTH DAY YEAR)

EPA FORM 2070-12 (7-81)

EPA

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 2 - WASTE INFORMATION

I. IDENTIFICATION

01 STATE	02 SITE NUMBER
KY	D042943423

II. WASTE STATES, QUANTITIES, AND CHARACTERISTICS

01 PHYSICAL STATES (Check all that apply)

- ☐ A. SOLID
- ☐ B. POWDER, FINES
- ☐ C. SLUDGE
- ☐ D. OTHER N/A (Specify)
- ☐ E. SLURRY
- ☒ F. LIQUID
- ☐ G. GAS

02 WASTE QUANTITY AT SITE (Measures of waste quantities must be independent)

TONS _____
CUBIC YARDS N/A
NO. OF DRUMS _____

03 WASTE CHARACTERISTICS (Check all that apply)

- ☐ A. TOXIC
- ☐ B. CORROSIVE
- ☐ C. RADIOACTIVE
- ☐ D. PERSISTENT
- ☐ E. SOLUBLE
- ☐ F. INFECTIOUS
- ☐ G. FLAMMABLE
- ☐ H. IGNITABLE
- ☐ I. HIGHLY VOLATILE
- ☐ J. EXPLOSIVE
- ☐ K. REACTIVE
- ☐ L. INCOMPATIBLE
- ☒ M. NOT APPLICABLE

III. WASTE TYPE

CATEGORY	SUBSTANCE NAME	01 GROSS AMOUNT	02 UNIT OF MEASURE	03 COMMENTS
SLU	SLUDGE			
OLW	OILY WASTE			
SOL	SOLVENTS	N/A		N/A
PSD	PESTICIDES			
OCC	OTHER ORGANIC CHEMICALS	Site is	IN Compliance with RCRA	Inspections.
IOC	INORGANIC CHEMICALS			
ACD	ACIDS			
BAS	BASES			
MES	HEAVY METALS			

IV. HAZARDOUS SUBSTANCES (See Appendix for most frequently cited CAS Numbers)

01 CATEGORY	02 SUBSTANCE NAME	03 CAS NUMBER	04 STORAGE/DISPOSAL METHOD	05 CONCENTRATION	06 MEASURE OF CONCENTRATION
	N/A		N/A		
	All wastes are Removed and transported to Emelle alabama's				
	Hazardous waste Facility. See Annual Report attached.				

V. FEEDSTOCKS (See Appendix for CAS Numbers)

CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER	CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER
FDS			FDS		
FDS			FDS		
FDS			FDS		
FDS			FDS		

VI. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

KNREPC State Files

EPA FORM 2070-12 (7-81)

EPA

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE: KY | 02 SITE NUMBER: D042943423

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A. GROUNDWATER CONTAMINATION
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____
04 NARRATIVE DESCRIPTION

N/A

01 ☐ B. SURFACE WATER CONTAMINATION
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____
04 NARRATIVE DESCRIPTION

N/A

01 ☐ C. CONTAMINATION OF AIR
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____
04 NARRATIVE DESCRIPTION

N/A

01 ☐ D. FIRE/EXPLOSIVE CONDITIONS
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____
04 NARRATIVE DESCRIPTION

N/A

01 ☐ E. DIRECT CONTACT
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____
04 NARRATIVE DESCRIPTION

N/A

01 ☐ F. CONTAMINATION OF SOIL
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 AREA POTENTIALLY AFFECTED: _____ (Acres)
04 NARRATIVE DESCRIPTION

N/A

01 ☐ G. DRINKING WATER CONTAMINATION
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____
04 NARRATIVE DESCRIPTION

N/A

01 ☐ H. WORKER EXPOSURE/INJURY
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 WORKERS POTENTIALLY AFFECTED: _____
04 NARRATIVE DESCRIPTION

N/A

01 ☐ I. POPULATION EXPOSURE/INJURY
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____
04 NARRATIVE DESCRIPTION

N/A

EPA

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION
01 STATE: KY | 02 SITE NUMBER: D042943423

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION
N/A

01 ☐ K. DAMAGE TO FAUNA — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION (Include name(s) of species)
N/A

01 ☐ L. CONTAMINATION OF FOOD CHAIN — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION
N/A

01 ☐ M. UNSTABLE CONTAINMENT OF WASTES (Spills/runoff/standing liquids/leaking drums) — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ — 04 NARRATIVE DESCRIPTION
N/A

01 ☐ N. DAMAGE TO OFFSITE PROPERTY — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION
N/A

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION
N/A

01 ☒ P. ILLEGAL/UNAUTHORIZED DUMPING — 02 ☐ OBSERVED (DATE: 1983) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION
~100 Drums of phenolic type compounds dumped on property IN LaGrange, Ky - Oldham County. That Site is known as the Dawkins Road Site.

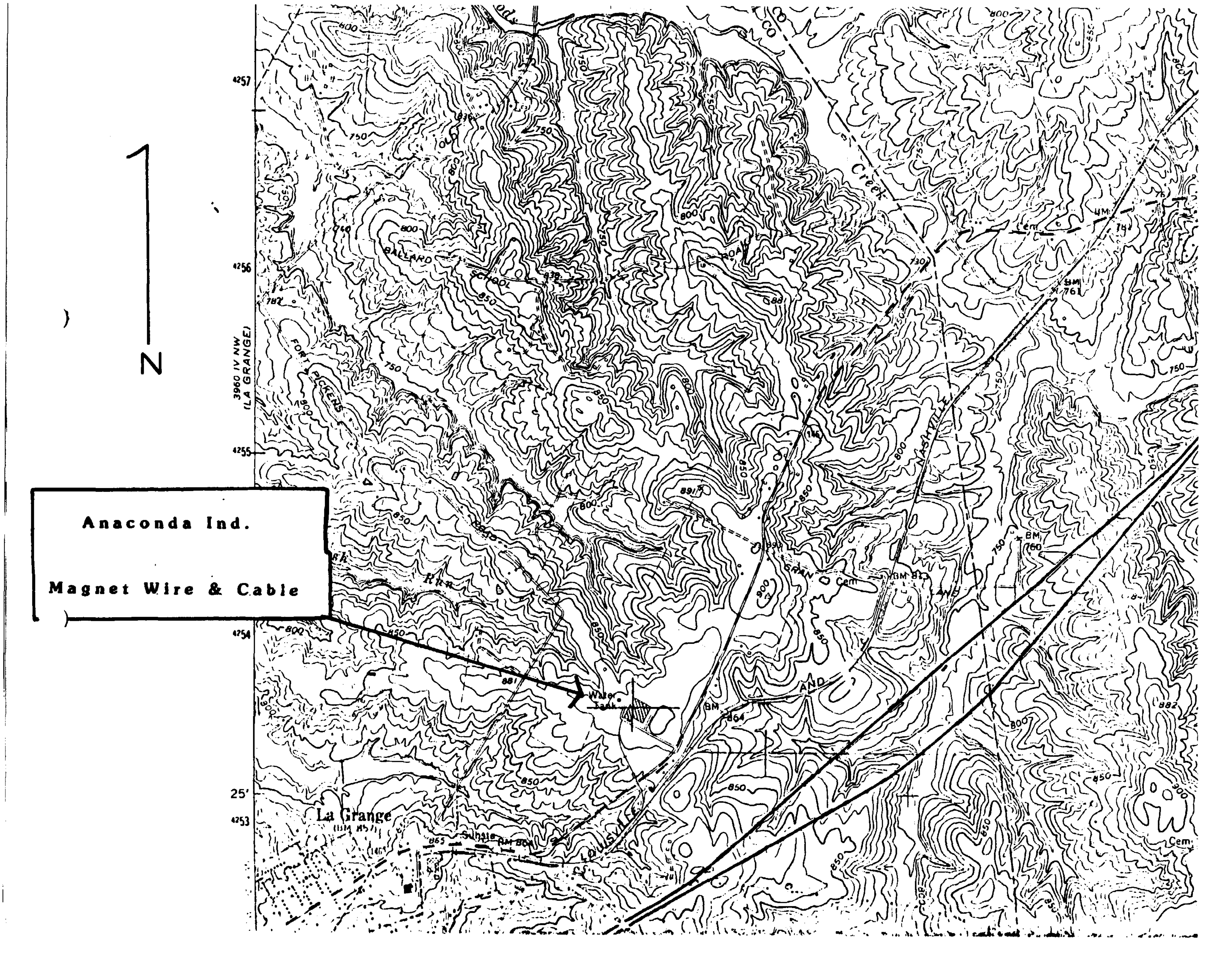
05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS
N/A

III. TOTAL POPULATION POTENTIALLY AFFECTED: _____

IV. COMMENTS
THE Site in question is in compliance with Inspections by RCRA As A generator. A part A was filed in 1980 and withdrawn in SEPT., 1981. I recommend this site receive NO Further Action. However, the DAWKins Road site (OLDHAM Co.) Contains Drums with Anaconda's Name on them.

V. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)
KNREPC FILES.

EPA FORM 2070-12 (7-81)


Anaconda Ind.
Magnet Wire & Cable
N
3960 IV NW
(LA GRANGE)
La Grange
LOUISVILLE
AND
NASHVILLE
Creek
BALLARD
SCHOOL
FORT PICKENS
Water Tank
Cem
25'

CHARLOTTE E. BALDWIN
SECRETARY

MARTHA LAYNE COLLINS
GOVERNOR

COMMONWEALTH OF KENTUCKY
NATURAL RESOURCES AND ENVIRONMENTAL PROTECTION CABINET
DEPARTMENT FOR ENVIRONMENTAL PROTECTION
FORT BOONE PLAZA
18 REILLY ROAD
FRANKFORT, KENTUCKY 40601

Documentation package FOR ANAConda IND. Magnet Wire & Cable

MEMORANDUM

TO: Barry Burrus, Chief
Uncontrolled Site Section

FROM: Bob Prewitt BSP
Uncontrolled Site Section

DATE: February 14, 1984

SUBJECT: Kentucky Uncontrolled Site Preliminary Assessment Report

Site Name: Dawkins Road Site,
Location: Dawkins Road, LaGrange, Ky.

Site Coordinator: Bob Prewitt
Field Contact: Marsha Swain

Background

The Dawkins Road Site is located in a junkyard, on Dawkins Road about 3/4 mile off of Hwy 146 west of LaGrange, Ky.

The junkyard is owned and operated by Jim Sanders. Between 1974-76 Mr. Sanders accepted approximately 100 drums of waste from Anaconda in LaGrange. Mr. Sanders emptied the contents of a few of these drums on the ground so he could clean and reuse them. The odor from the waste was so noxious he placed the remaining drums into an empty pond on his property and covered them with dirt. An inspection on November 30, 1982 by the field office noted a phenolic odor still present around the site. Samples were taken from different areas at this site by the Louisville Field office and analysis of these samples revealed high concentrations of phenol, napthalene and cresylic acid.

EPA Documents

Transmittal letter
Preliminary Assessment Form 2070-12

Additional Information

A Geological Assessment of this site was done November 18, 1983 by Jim Jarman. It will be included with the PA for EPA's perusal.

Recommended Action

Considering the facts that we are dealing with listed hazardous wastes and an area that lends itself to groundwater contamination, the site was given a medium priority by EPA's ranking system. This very simply means a site inspection is required. It is also my recommendation that due to the scope of investigation needed this should be handled by the EPA FIT.

BP/kwb

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT

EPA

I. IDENTIFICATION
01 STATE: Ky | 02 SITE NUMBER:

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site)	02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER
Dawkins Road Site	Behind Jim Sanders Dump

03 CITY	04 STATE	05 ZIP CODE	06 COUNTY	07 COUNTY CODE	08 CONG DIST
La Grange	Ky	40031	Oldham		

09 COORDINATES LATITUDE	LONGITUDE
38 24 30.0	85 24 01.3

10 DIRECTIONS TO SITE (Starting from nearest public road)
From Hwy 146 West of LaGrange take Dawkins Rd 3/4 mile to Jim Sanders junkyard on right

III. RESPONSIBLE PARTIES

01 OWNER (If known)	02 STREET (Business, mailing, residential)
Jim Sanders	Dawkins Rd

03 CITY	04 STATE	05 ZIP CODE	06 TELEPHONE NUMBER
La Grange	Ky	40031	( ) none

07 OPERATOR (If known and different from owner)	08 STREET (Business, mailing, residential)
Same	

09 CITY	10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER
			( )

13 TYPE OF OWNERSHIP (Check one)
☒ A. PRIVATE ☐ B. FEDERAL: _____ (Agency name) ☐ C. STATE ☐ D. COUNTY ☐ E. MUNICIPAL
☐ F. OTHER: _____ (Specify) ☐ G. UNKNOWN

14 OWNER-OPERATOR NOTIFICATION ON FILE (Check all that apply)
☐ A. RCRA 3001 DATE RECEIVED: ___/___/___ (MONTH DAY YEAR) ☐ B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: ___/___/___ (MONTH DAY YEAR) ☒ C. NONE

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON SITE INSPECTION
☒ YES ☐ NO DATE 1/11/83 (MONTH DAY YEAR)
BY (Check all that apply)
☐ A. EPA ☐ B. EPA CONTRACTOR ☒ C. STATE ☐ D. OTHER CONTRACTOR
☐ E. LOCAL HEALTH OFFICIAL ☐ F. OTHER: _____ (Specify)
CONTRACTOR NAME(S): _____

02 SITE STATUS (Check one)
☒ A. ACTIVE ☐ B. INACTIVE ☐ C. UNKNOWN

03 YEARS OF OPERATION
_____ (BEGINNING YEAR) _____ (ENDING YEAR) ☐ UNKNOWN

04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED
results of 1/11/83 sampling revealed phenol, naphthalene, cresylic acid (o-cresol m-cresol p-cresol)

05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION
Due to the geological formation in this area and the concentrations of hazardous wastes present the potential for contamination is very high.

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents)
☐ A. HIGH (Inspection required promptly) ☒ B. MEDIUM (Inspection required) ☐ C. LOW (Inspect on time available basis) ☐ D. NONE (No further action needed, complete current disposition form)

VI. INFORMATION AVAILABLE FROM

01 CONTACT	02 OF (Agency/Organization)	03 TELEPHONE NUMBER
Marsha Swain	Div Waste Mgt Louisville Field Off	(502) 588-4254

04 PERSON RESPONSIBLE FOR ASSESSMENT	05 AGENCY	06 ORGANIZATION	07 TELEPHONE NUMBER	08 DATE
Bob Prewitt	Ky Div Wm	Uncontrolled Sites	(502) 564-6716	11/18/83 (MONTH DAY YEAR)

EPA FORM 2070-12 (7-81)

EPA

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 2 - WASTE INFORMATION

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER

II. WASTE STATES, QUANTITIES, AND CHARACTERISTICS

01 PHYSICAL STATES (Check all that apply)

- ☐ A. SOLID
- ☐ B. POWDER, FINES
- ☐ C. SLUDGE
- ☐ D. OTHER (Specify)
- ☐ E. SLURRY
- ☒ F. LIQUID
- ☐ G. GAS

02 WASTE QUANTITY AT SITE (Measures of waste quantities must be independent)

- TONS
- CUBIC YARDS
- NO. OF DRUMS 100

03 WASTE CHARACTERISTICS (Check all that apply)

- ☒ A. TOXIC
- ☐ B. CORROSIVE
- ☐ C. RADIOACTIVE
- ☐ D. PERSISTENT
- ☐ E. SOLUBLE
- ☐ F. INFECTIOUS
- ☐ G. FLAMMABLE
- ☐ H. IGNITABLE
- ☐ I. HIGHLY VOLATILE
- ☐ J. EXPLOSIVE
- ☐ K. REACTIVE
- ☐ L. INCOMPATIBLE
- ☐ M. NOT APPLICABLE

III. WASTE TYPE

CATEGORY	SUBSTANCE NAME	01 GROSS AMOUNT	02 UNIT OF MEASURE	03 COMMENTS
SLU	SLUDGE			
OLW	OILY WASTE			
SOL	SOLVENTS			
PSD	PESTICIDES			
OCC	OTHER ORGANIC CHEMICALS	100 DR		drums were compacted & covered
IOC	INORGANIC CHEMICALS			
ACD	ACIDS			
BAS	BASES			
MES	HEAVY METALS			

IV. HAZARDOUS SUBSTANCES (See Appendix for most frequently cited CAS Numbers)

01 CATEGORY	02 SUBSTANCE NAME	03 CAS NUMBER	04 STORAGE/DISPOSAL METHOD	05 CONCENTRATION	06 MEASURE OF CONCENTRATION
OCC	Cresol	1319-77-3	compacted drums	3985.0	mg/kg
OCC	phenol	108-95-2	" "	220.0	"
OCC	napthalene	91-20-3	" "	468.0	"

V. FEEDSTOCKS (See Appendix for CAS Numbers)

CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER	CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER
FDS	napthalene	91-20-3	FDS		
FDS			FDS		
FDS			FDS		
FDS			FDS		

VI. SOURCES OF INFORMATION (Cite specific references, e.g., State files, sample analysis, reports)

State sample analysis
State files

EPA

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 [X] A. GROUNDWATER CONTAMINATION — 02 [ ] OBSERVED (DATE _____) — [X] POTENTIAL — [ ] ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ — 04 NARRATIVE DESCRIPTION
see geologic report

01 [X] B. SURFACE WATER CONTAMINATION — 02 [ ] OBSERVED (DATE: _____) — [X] POTENTIAL — [ ] ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ — 04 NARRATIVE DESCRIPTION
Drums were emptied on the ground others were compacted & buried

01 [ ] C. CONTAMINATION OF AIR — 02 [ ] OBSERVED (DATE: _____) — [ ] POTENTIAL — [ ] ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ — 04 NARRATIVE DESCRIPTION

01 [ ] D. FIRE EXPLOSIVE CONDITIONS — 02 [ ] OBSERVED (DATE _____) — [ ] POTENTIAL — [ ] ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ — 04 NARRATIVE DESCRIPTION

01 [X] E. DIRECT CONTACT — 02 [ ] OBSERVED (DATE _____) — [X] POTENTIAL — [ ] ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ — 04 NARRATIVE DESCRIPTION

01 [X] F. CONTAMINATION OF SOIL — 02 [X] OBSERVED (DATE: 11/30/82) — [ ] POTENTIAL — [ ] ALLEGED
03 AREA POTENTIALLY AFFECTED: _____ (Acres) — 04 NARRATIVE DESCRIPTION
Drums were emptied on the ground sometime between 1974 & 1976

01 [X] G. DRINKING WATER CONTAMINATION — 02 [ ] OBSERVED (DATE: _____) — [ ] POTENTIAL — [ ] ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ — 04 NARRATIVE DESCRIPTION
see geologic report

01 [ ] H. WORKER EXPOSURE/INJURY — 02 [ ] OBSERVED (DATE _____) — [ ] POTENTIAL — [ ] ALLEGED
03 WORKERS POTENTIALLY AFFECTED: _____ — 04 NARRATIVE DESCRIPTION

01 [ ] I. POPULATION EXPOSURE/INJURY — 02 [ ] OBSERVED (DATE _____) — [ ] POTENTIAL — [ ] ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ — 04 NARRATIVE DESCRIPTION

EPA

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER

HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

J. DAMAGE TO FLORA
NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

K. DAMAGE TO FAUNA
NARRATIVE DESCRIPTION (Include name(s) of species)

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

L. CONTAMINATION OF FOOD CHAIN
NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

M. UNSTABLE CONTAINMENT OF WASTES
(Spills/runoff; standing liquids; leaking drums)
POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N. DAMAGE TO OFFSITE PROPERTY
NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs
NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

X P. ILLEGAL/UNAUTHORIZED DUMPING
NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL X ALLEGED

Approximately 100 drums were placed in a 15X30 ft pond compacted & covered by dirt

DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

TOTAL POPULATION POTENTIALLY AFFECTED: _____

COMMENTS

SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

State files
Attached Geological assessment

FORM 2070-12 (7-81)

EPA

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 [X] A. GROUNDWATER CONTAMINATION
03 POPULATION POTENTIALLY AFFECTED: _____
02 [ ] OBSERVED (DATE: _____) [X] POTENTIAL [ ] ALLEGED
04 NARRATIVE DESCRIPTION

see geologic report

01 [X] B. SURFACE WATER CONTAMINATION
03 POPULATION POTENTIALLY AFFECTED: _____
02 [ ] OBSERVED (DATE: _____) [X] POTENTIAL [ ] ALLEGED
04 NARRATIVE DESCRIPTION

Drums were emptied on the ground others were compacted & buried

01 [ ] C. CONTAMINATION OF AIR
03 POPULATION POTENTIALLY AFFECTED: _____
02 [ ] OBSERVED (DATE: _____) [ ] POTENTIAL [ ] ALLEGED
04 NARRATIVE DESCRIPTION

01 [ ] D. FIRE/EXPLOSIVE CONDITIONS
03 POPULATION POTENTIALLY AFFECTED: _____
02 [ ] OBSERVED (DATE: _____) [ ] POTENTIAL [ ] ALLEGED
04 NARRATIVE DESCRIPTION

01 [X] E. DIRECT CONTACT
03 POPULATION POTENTIALLY AFFECTED: _____
02 [ ] OBSERVED (DATE: _____) [X] POTENTIAL [ ] ALLEGED
04 NARRATIVE DESCRIPTION

01 [X] F. CONTAMINATION OF SOIL
03 AREA POTENTIALLY AFFECTED: _____ (Acres)
02 [X] OBSERVED (DATE: 11/30/82) [ ] POTENTIAL [ ] ALLEGED
04 NARRATIVE DESCRIPTION

Drums were emptied on the ground sometime between 1974 & 1976

01 [X] G. DRINKING WATER CONTAMINATION
03 POPULATION POTENTIALLY AFFECTED: _____
02 [ ] OBSERVED (DATE: _____) [ ] POTENTIAL [ ] ALLEGED
04 NARRATIVE DESCRIPTION

see geologic report

01 [ ] H. WORKER EXPOSURE/INJURY
03 WORKERS POTENTIALLY AFFECTED: _____
02 [ ] OBSERVED (DATE: _____) [ ] POTENTIAL [ ] ALLEGED
04 NARRATIVE DESCRIPTION

01 [ ] I. POPULATION EXPOSURE/INJURY
03 POPULATION POTENTIALLY AFFECTED: _____
02 [ ] OBSERVED (DATE: _____) [ ] POTENTIAL [ ] ALLEGED
04 NARRATIVE DESCRIPTION

REF: 4AW-RM

This letter was sent 12-16-81 to the attached list of KY facilities.

Gentlemen:

This letter is to acknowledge receipt of your request for withdrawal of your application for a permit under the Resource Conservation and Recovery Act (RCRA), as amended. Your letter indicated that you no longer treat, store, or dispose of hazardous waste.

It has been our general experience that the RCRA regulations and the amendments which have been published since May 19, 1980, have caused confusion, and have been subjected to misinterpretation. This confusion on the part of the regulated community has been compounded, due to EPA's and the State's overlapping responsibilities for implementation of the hazardous waste regulatory program during the period of interim authorization.

Withdrawal of your permit application constitutes revokation of interim status, as defined by Section 3005(e) of the Act. Consequently, under the Federal program, you would no longer be allowed to treat, store, or dispose of hazardous waste. However, as you are probably aware, the State has been authorized to implement certain requirements of the program in lieu of the Federal regulatory requirements. Therefore, withdrawal of your applications also directly affect the State program.

In light of the foregoing, EPA plans to proceed as follows. EPA will place your file in our "suspense" file. This action, in essence, revokes you interim status under the Federal program. However, we will forward the request to the State for formal action. The State will contact you if further information relating to your request is required. If the State agrees that your waste is not hazardous, and that you do not need a RCRA permit, the State will notify you of this determination, and by carbon copy of this notification sent to EPA, your application will be formally withdrawn, and your file will be inactivated.

In conclusion, this letter should <u>not</u> be construed as EPA's concurrence with your determination that RCRA regulatory requirements are not applicable to your facility. Furthermore, this letter does not relieve you of your responsibility to comply with State and Local hazardous waste regulatory requirements.

Anaconda

Finally, your request to withdraw interim status means that you may not treat, store, or dispose of hazardous waste without a permit issued under the authority of §3005 of the Act and 40 CFR 264.

If for any reason you wish to reconsider this withdrawal request, please advise this office and the State within the next ten days. You should be receiving a formal response to your request from the State in the near future. If you require further clarification, please contact John Herrmann of my staff (404) 881-3433 or a representative of the State hazardous waste program.

Sincerely yours,

James H. Scarbrough, Chief
Resicuals Management Branch

4AW-RM:JHERRMANN:sm:3433:12/4/81: 0017S

4AW-RM	4AW-RM	4AW-RM
Herrmann	Dickinson	Scarbrough

REQUEST

ANACONDA Industries
ANACONDA Magnet Wire Engineering Center
8th Street & Clay Avenue
Muskegon, Michigan 49440
Telephone 616 726 4924

000305

February 6, 1981

Permits Section
U. S. Environmental Protection Agency
345 Courtland Street N. E.
Atlanta, Ga 30365

Re: KYDO42943423

Dear Sir:

Athough we applied for a permit to store hazardous waste at our LaGrange, Kentucky facility, we now elect not to store, so will not retain our waste over 90 days. Please cancel our application for a permit to store hazardous waste.

C

decided not to

Sincerely,

ANACONDA INDUSTRIES
Magnet Wire

Charles Henricks

Charles Henricks, Manager
Energy and Environment

CH/vm

...th ELITE type (12 characters/inch) in the unshaded areas only.

Form Approved OMB No. 158-S79016
GSA No. 0246-EPA-OT

U.S. ...RONMENTAL PROTECTION AGENCY

NOTIFICATI... OF HAZARDOUS WASTE ACTIVI...

...STALLA-...ION'S EPA I.D. NO.

I. NAME OF INSTALLATION

II. INSTALLATION MAILING ADDRESS

III. LOCATION OF INSTALLATION

000123

PLEASE PLACE LABEL IN THIS SPACE

EPA/REGION IV

SEP 13 12 32 PM

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law *(Section 3010 of the Resource Conservation and Recovery Act).*

DETACH

FOR OFFICIAL USE ONLY

COMMENTS

INSTALLATION'S EPA I.D. NUMBER: F K S D 0 2 5 9 8 5 2 7 2 1

APPROVED

DATE RECEIVED (yr., mo., & day): 8 8 0 5 1 5

I. NAME OF INSTALLATION

ANACONDA INDUSTRIES MAGNET WIRE

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX: PO BOX 26

CITY OR TOWN: LAGRANGE

ST.: KY

ZIP CODE: 40031

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER: HIGHWAY 146

CITY OR TOWN: LAGRANGE

ST.: KY

ZIP CODE: 40031

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title): HENRICKS CHARLES SUPV E&E

PHONE NO. (area code & no.): 616-726-4924

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER: ANACONDA INDUSTRIES

B. TYPE OF OWNERSHIP (enter the appropriate letter into box): M

F = FEDERAL
M = NON-FEDERAL

VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))

[X] A. GENERATION
[ ] B. TRANSPORTATION (complete item VII)
[X] C. TREAT/STORE/DISPOSE
[ ] D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION (transporters only – enter "X" in the appropriate box(es))

[ ] A. AIR [ ] B. RAIL [ ] C. HIGHWAY [ ] D. WATER [ ] E. OTHER (specify):

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.

[X] A. FIRST NOTIFICATION
[ ] B. SUBSEQUENT NOTIFICATION (complete Item C)

C. INSTALLATION'S EPA I.D. NO.

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

I.D. → W

IX. DESCRIPTION OF HAZARDOUS WASTES *(continued from front)*

A. HAZARDOUS WASTES FROM NON–SPECIFIC SOURCES. Enter the four–digit number from 40 CFR Part 261.31 for each listed waste from non–specific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
F003	F004				
7	8	9	10	11	12

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four–digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four–digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
U054	U188	U239			
37	38	39	40	41	42
43	44	45	46	47	48

D. LISTED INFECTIOUS WASTES. Enter the four–digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

E. CHARACTERISTICS OF NON–LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non–listed hazardous wastes your installation handles. *(See 40 CFR Parts 261.21 – 261.24.)*

- [X] 1. IGNITABLE (D001)
- [ ] 2. CORROSIVE (D002)
- [ ] 3. REACTIVE (D003)
- [ ] 4. TOXIC (D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE	NAME & OFFICIAL TITLE *(type or print)*	DATE SIGNED
Wm Peterson	Plant Manager	8-13-80

EPA Form 8700-12 (6-80) REVERSE

WILLIAM G. PETERSON

DETACH

...ed areas only
...ite type, i.e., 12 char...s/inch).

Form Approved OMB No. 158-R0175

U.S. ENVIRONMENTAL PROTECTION AGENCY

EPA GENERAL INFORMATION

Consolidated Permits Program
(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER

F KYD042943423 3 D

LABEL ITEMS

I. EPA I.D. NUMBER

III. FACILITY NAME

V. FACILITY MAILING ADDRESS

VI. FACILITY LOCATION

PLEASE PLACE LABEL IN THIS SPACE

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent *(the area to the left of the label space lists the information that should appear)*, please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI *(except VI-B which must be completed regardless)*. Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	YES	NO	FORM ATTACHED	SPECIFIC QUESTIONS	YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility *(either existing or proposed)* include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)	X			D. Is this a proposed facility *(other than those described in A or B above)* which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X			F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

SKIP ANACONDA INDUSTRIES.MAGNET WIRE

IV. FACILITY CONTACT

A. NAME & TITLE *(last, first, & title)*	B. PHONE *(area code & no.)*
PETERSON WILLIAM PLANT MANAGER	502 222 9415

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX

P.O. BOX 26

B. CITY OR TOWN	C. STATE	D. ZIP CODE
LAGRANGE	KY	40031

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER

HIGHWAY 146

B. COUNTY NAME

LDHAM

C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE *(if known)*
LAGRANGE	KY	40031	

A. FIRST	B. SECOND
C 7 3357 (specify) Drawing and Insulating non-Ferrous Wire	C 7 (specify)
C. THIRD	**D. FOURTH**
C 7 (specify)	C 7 (specify)

VIII. OPERATOR INFORMATION

A. NAME

C B ANACONDA INDUSTRIES

B. Is the name listed in Item VIII-A also the owner? ☒ YES ☐ NO

C. STATUS OF OPERATOR *(Enter the appropriate letter into the answer box; if "Other", specify.)*

F = FEDERAL
S = STATE
P = PRIVATE
M = PUBLIC *(other than federal or state)*
O = OTHER *(specify)*

P (specify)

D. PHONE *(area code & no.)*

C A 203 574 8500

E. STREET OR P.O. BOX

414 MEADOW STREET

F. CITY OR TOWN

WATERBURY

G. STATE CT

H. ZIP CODE 06702

IX. INDIAN LAND

Is the facility located on Indian lands? ☐ YES ☒ NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES *(Discharges to Surface Water)*	D. PSD *(Air Emissions from Proposed Sources)*
N KY0002208	9 P
B. UIC *(Underground Injection of Fluids)*	**E. OTHER** *(specify)*
U	9 104 3100 0004 (specify) KY Air Pollution Control
C. RCRA *(Hazardous Wastes)*	**E. OTHER** *(specify)*
R	9 (specify)

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property bounderies. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS *(provide a brief description)*

Draw and insulate copper wire

XIII. CERTIFICATION *(see instructions)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

NAME & OFFICIAL TITLE *(type or print)*	B. SIGNATURE	C. DATE SIGNED
H. M. WENZEL, VICE PRES.-GEN.MGR.		/ /

COMMENTS FOR OFFICIAL USE ONLY

...sed areas only
...te type, i.e., 12 characters/inch).

Form Approved OMB No. 158-S80004

U.S. ...IRONMENTAL PROTECTION AGENCY

HAZARD...JS WASTE PERMIT APPLICATION

Consolidated Permits Program

(This information is required under Section 3005 of RCRA.)

I. EPA I.D. NUMBER

F	K	Y	D	0	4	2	9	4	3	4	2	3	3	1

F/A: 3 C: 1

...ICIAL USE ONLY

...ATION ROVED	DATE RECEIVED (yr., mo., & day)	COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below *(mark one box only)* to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION *(place an "X" below and provide the appropriate date)*

[X] 1. EXISTING FACILITY *(See instructions for definition of "existing" facility. Complete item below.)*

FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED *(use the boxes to the left)*

C	YR.	MO.	DAY
8	87	02	01

[ ] 2. NEW FACILITY *(Complete item below.)*

FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN

YR.	MO.	DAY

B. REVISED APPLICATION *(place an "X" below and complete Item I above)*

[ ] 1. FACILITY HAS INTERIM STATUS

[ ] 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES – CODES AND DESIGN CAPACITIES

A. PROCESS CODE – Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process *(including its design capacity)* in the space provided on the form *(Item III-C).*

B. PROCESS DESIGN CAPACITY – For each code entered in column A enter the capacity of the process.

1. AMOUNT – Enter the amount.
2. UNIT OF MEASURE – For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:		
CONTAINER *(barrel, drum, etc.)*	S01	GALLONS OR LITERS
TANK	S02	GALLONS OR LITERS
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS
Disposal:		
INJECTION WELL	D79	GALLONS OR LITERS
LANDFILL	D80	ACRE-FEET *(the volume that would cover one acre to a depth of one foot)* OR HECTARE-METER
LAND APPLICATION	D81	ACRES OR HECTARES
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Treatment:		
TANK	T01	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
OTHER *(Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)*	T04	GALLONS PER DAY OR LITERS PER DAY

UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G
LITERS	L
CUBIC YARDS	Y
CUBIC METERS	C
GALLONS PER DAY	U
LITERS PER DAY	V
TONS PER HOUR	D
METRIC TONS PER HOUR	W
GALLONS PER HOUR	E
LITERS PER HOUR	H
ACRE-FEET	A
HECTARE-METER	F
ACRES	B
HECTARES	Q

EXAMPLE FOR COMPLETING ITEM III *(shown in line numbers X-1 and X-2 below):* A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT (specify)	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY
X-1	S02	600	G	
X-2	T03	20	E	

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT (specify)	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY
1	S01	8700	G	
2				
3				
4				
5				
6				
7				
8				
9				
10				

C DUP F/A: C: 1

RECEIVED EPA/REGION IV

Continued from the front.

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR DESCRIBING OTHER PROCESSES (code "T"). FOR EACH PROCESS INCLUDE DESIGN CAPACITY.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four–digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four–digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non–listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES

1. PROCESS CODES:
   For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.
   For non–listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non–listed hazardous wastes that possess that characteristic or toxic contaminant.
   Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV *(shown in line numbers X-1, X-2, X-3, and X-4 below)* — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non–listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARD. WASTE NO (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

Page before completing if you have more than 26 wastes to list. Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1): U 0 4 2 9 4 3 4 2 3 | F/A: 3 | C: 1

FOR OFFICIAL USE ONLY: S: W | DUP | F/A: | C: 2 | DUP

V. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (If a code is not entered in D(1))
1	F003	70,000	P	S01	
2	F004	70,000	P	S01	
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					

CONTINUE ON REVERS

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T"). FOR EACH PROCE... INCLUDE DESIGN CAPACITY.

V. DESCRIPTION OF HAZARDOUS WASTES

. **EPA HAZARDOUS WASTE NUMBER** — Enter the four—digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four—digit number*(s)* from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non—listed waste*(s)* that will be handled which possess that characteristic or contaminant.

UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

PROCESSES

1. **PROCESS CODES:**
   For listed hazardous waste: For each listed hazardous waste entered in column A select the code*(s)* from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.
   For non—listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code*(s)* from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non—listed hazardous wastes that possess that characteristic or toxic contaminant.
   Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code*(s)*.

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

TE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by e than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

MPLE FOR COMPLETING ITEM IV *(shown in line numbers X-1, X-2, X-3, and X-4 below)* — A facility will treat and dispose of an estimated 900 pounds /ear of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non—listed wastes. Two wastes orrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (If a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

ontinued from the front.

V. DESCRIPTION OF HAZARDOUS WASTE (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE

EPA I.D. NO. *(enter from page 1)*

K	Y	D	0	4	2	9	4	3	4	2	3	T/A	C
												3	6

VI. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility *(see instructions for more detail)*.

VII. PHOTOGRAPHS

All existing facilities must include photographs *(aerial or ground—level)* that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas *(see instructions for more detail)*.

VIII. FACILITY GEOGRAPHIC LOCATION

LATITUDE *(degrees, minutes, & seconds)*	LONGITUDE *(degrees, minutes, & seconds)*
38 25 C90	85 20 32 5

IX. FACILITY OWNER

[X] A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER	2. PHONE NO. *(area code & no.)*

3. STREET OR P.O. BOX	4. CITY OR TOWN	5. ST.	6. ZIP CODE
	C G		

X. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME *(print or type)*	B. SIGNATURE	C. DATE SIGNED
H.M.WENZEL, VICE PRES.-GEN.MGR.		

XI. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME *(print or type)*	B. SIGNATURE	C. DATE SIGNED

HAZARDOUS WASTE INFORMATION SUMMARY (CONTINUED)

INSTALLATION NAME: ANACONDA INDUSTRIES, MAGNET WIRE EPA ID NUMBER: KYD04-294-3423

LINE NUMBER	DESCRIPTION OF WASTE	EPA WASTE NUMBER	DOT HAZARD CLASS	PHYSICAL STATE	AMOUNT OF WASTE	UNIT OF MEASURE	DISPOSITION CODE	TRANSFER CODE	HANDLING METHOD
1	WASTE CAUSTIC WASH SOLUTION UN1760	D002	CM	L&M	440	G	KYXT	ALD000622464	

M.2 - SITE MAINTENANCE FORM

* ACTION: _ *

EPA ID : KYD042943423

SITE NAME: ANACONDA IND MAGNET WIRE & CABLE SOURCE: H

STREET : HWY 146 CONG DIST: 04

CITY : LAGRANGE ZIP: 40031

CNTY NAME: OLDHAM CNTY CODE : 185

LATITUDE : 38/25/09.0 LONGITUDE : 085/20/32.0

LL-SOURCE: R LL-ACCURACY:

SMSA : 4520 HYDRO UNIT: 05140102

INVENTORY IND: Y REMEDIAL IND: Y REMOVAL IND: N FED FAC IND: N

NPL IND: N NPL LISTING DATE: NPL DELISTING DATE:

SITE/SPILL IDS:

RPM NAME: BETSY SHAVER RPM PHONE: 404-881-2284

SITE CLASSIFICATION: SITE APPROACH:

DIOXIN TIER: REG FLD1: REG FLD2: 6

RESP TERM: PENDING ( ) NO FURTHER ACTION (X)

ENF DISP: NO VIABLE RESP PARTY ( ) VOLUNTARY RESPONSE ( )
ENFORCED RESPONSE ( ) COST RECOVERY ( )

SITE DESCRIPTION:

M.2 - ALIAS/ALIAS LOCATION MAINTENANCE FORM

ACTION: _

SITE: ANACONDA IND MAGNET WIRE & CABLE

EPA ID: KYD042943423 ALIAS SEQ NO: 01

ALIAS NAME: ANAMAG LTD. SOURCE: R _____ _

ALIAS LOCATION ACTION: _

CONTIGUOUS PORTION OF SITE? FED FAC IND: _ _

STREET : CONG DIST : _____ __

CITY : ST: ZIP: _____ __ _____-____

CNTY NAME: CNTY CODE: _____ ___

LATITUDE : / / LONGITUDE : / / __/__/__._ ___/__/__._

LL-SOURCE: LL-ACCURACY: _ _

SMSA : HYDRO UNIT: ____ _____

ALIAS DESCRIPTION:

_____

_____

_____

_____

M.2 - PROGRAM MAINTENANCE FORM

ACTION: _

SITE: ANACONDA IND MAGNET WIRE & CABLE

EPA ID: KYD042948428 PROGRAM CODE: H01 PROGRAM TYPE: _

PROGRAM QUALIFIER: ALIAS LINK :

PROGRAM NAME: SITE EVALUATION

DESCRIPTION:

M.2 - EVENT MAINTENANCE FORM

* ACTION: _ *

SITE: ANACONDA IND MAGNET WIRE & CABLE
PROGRAM: SITE EVALUATION

EPA ID: KYD042943423 PROGRAM CODE: H01 EVENT TYPE: DS1

FMS CODE: EVENT QUALIFIER : EVENT LEAD: E * _ ___ - *

EVENT NAME: DISCOVERY STATUS: * _____ - *

DESCRIPTION:

* _____ *
* _____ *
* _____ *
* _____ *

ORIGINAL	CURRENT	ACTUAL			
START:	START:	START:	* __/__/__	__/__/__	__/__/__ *
COMP :	COMP :	COMP : 08/01/80	* __/__/__	__/__/__	__/__/__ *

HQ COMMENT:

* _____ *

RG COMMENT:

* _____ *

COOP AGR #	AMENDMENT #	STATUS	STATE %			
			0	* _____	_____	___ ___ *

M.2 - EVENT MAINTENANCE FORM

* ACTION: _ *

SITE: ANACONDA IND MAGNET WIRE & CABLE
PROGRAM: SITE EVALUATION

EPA ID: KYD042943423 PROGRAM CODE: H01 EVENT TYPE: PA1

FMS CODE: EVENT QUALIFIER : EVENT LEAD: S * _ ___ _ *

EVENT NAME: PRELIMINARY ASSESSMENT STATUS: * _____ _ *

DESCRIPTION:

* _____ *
* _____ *
* _____ *
* _____ *

ORIGINAL	CURRENT	ACTUAL			
START:	START:	START: 08/26/85	__/__/__	__/__/__	__/__/__
COMP :	COMP :	COMP : 08/26/85	__/__/__	__/__/__	__/__/__

HQ COMMENT:

* _____ *

RG COMMENT:

* _____ *

COOP AGR #	AMENDMENT #	STATUS	STATE %				
			0	_____	_____	__	___

M.2 - COMMENT MAINTENANCE FORM

SITE: ANACONDA IND MAGNET WIRE & CABLE

EPA ID: KYD042943423

COM NO	COMMENT		ACTION	
001	"NO" PART A- ON FILE	*	-	*
		*		*

M.2 - REGIONAL UTILITY MAINTENANCE FORM

SITE: ANACONDA IND MAGNET WIRE & CABLE

EPA ID: KYD042943423

REG CODE: 4C85-01 * ACTION: _ *

DESCRIPTION: CERCLA FY85 COOPERATIVE AGREEMENT; PA * _____ *

* _____ *

DATE1: * __/__/__ *

DATE2: * __/__/__ *

DATE3: * __/__/__ *

FREE FIELD: * _____ *

REG CODE: 4NFA-01 * ACTION: _ *

DESCRIPTION: NO FURTHER ACTION; NO DISPOSAL ON SITE. * _____ *

* _____ *

DATE1: * __/__/__ *

DATE2: * __/__/__ *

DATE3: * __/__/__ *

FREE FIELD: * _____ *

SITE SCREENING SUMMARY 11-25-86 (3)

Site Name: Anaconda Ind. Magnet Wire and Cable

EPA ID #: KYD042943423

Reviewer Name: Keith Burch Date: 01/22/87

I. INITIAL REVIEW: (Check where appropriate)

NPL ___ RCRA * Fed. Fac. ___ "Low Priority" Landfill ___

NFA ___ reason: _____

* Registered generator, but not a TSD facility.

II. LEAD: Fund ___ Enforcement ___ Unknown ___

III. REMOVAL: Needed ___ reason: _____

Completed ___ (score using preremoval conditions)

IV. HRS SCORE: OR 13.26 NOR 10.96 Confidence: high ___ medium ___ low ✓

V. LOCATION: Latitude: 38°25'09" Longitude: 085°20'32"

V. INFORMATION NEEDED: (Check information needed to determine disposition)

✓ A. Preliminary Assessment 08/04/85 (Notes/sources for future reference)

___ 1. RCRA Status Information
✓ 2. Observed Release
✓ 3. Target Information
___ 4. Distance to Surface Water
✓ 5. Depth to aquifer of concern
___ 6. Waste identity
✓ 7. Hazardous waste quantity
___ 8. Others (list)

B. Site Investigation

___ 1. Waste identity
___ 2. Distance to surface water
✓ 3. Slope/intervening terrain
✓ 4. Containment
✓ 5. Observed release (surface)
✓ 6. Observed release (ground)
___ 7. Hazardous waste quantity
___ 8. Others (list)

Facility is a registered generator and transports its waste off site. During the late 60's and early 70's waste was transported to the Dawkins Road Site and the Red Penn Landfill, both of which are under investigation.

CRITICAL HRS FACTOR DOCUMENTATION FORM DATE: 01/22/87

SITE NAME: Anaconda Ind. Magnet Wire and Cable

EPA ID #: KYD042943423 REVIEWER: Keith Burch

1) Is an observed release documented (background and site samples are available and the site is shown to be the source of the contamination) or is one likely?

GROUNDWATER: Yes ___ No ✓ Likely ___ SURFACE WATER: Yes ___ No ✓ Likely ___
Groundwater info source: PA - No sampling or suspected release has occurred
Surface water info source: PA - "

2) What is the depth at the site to the shallowest aquifer used locally for drinking water?

Depth: 20 Known ___ Estimated ✓ Unknown ___
Source: Red Penn SIR indicated that groundwater was encountered at ~20 feet. May be different at this location.

3) What is the distance to surface water from the hazardous waste?

Distance: 1.2 miles Known ___ Estimated ✓ Unknown ___
Source: Location measured from facility to perennial tributary of Harrods Creek. Smithfield Quadrangle.

4) What are the most toxic/persistent chemicals at the site: Unknown ___

a) Phenol b) Xylene c) ___
Source: Site file - Registration of Hazardous Waste Activity

5) What is the hazardous waste quantity?

Quantity: Used default value Known ___ Estimated ___ Unknown ✓
Source: Waste is shipped offsite. None is disposed on site.

6) What is the distance to the nearest public water supply well using the aquifer of concern and what is the population served?

Distance: >3 miles Known ✓ Estimated ___ Unknown ___
Population: 0 Known ✓ Estimated ___ Unknown ___
Source: KY Active Public Drinking Water Systems Listing

7) What is the distance to the nearest private water supply well using the aquifer of concern and what is the population served within 3 miles?

Distance: 2 miles Known ___ Estimated ✓ Unknown ___
Population: 150 Known ___ Estimated ✓ Unknown ___
Source: Although the town of LaGrange has its own water system, it is unknown what the extent of service is. The potential for private wells exists.

8) What is the distance to the nearest downstream surface water intake and the population served?

Distance: >3 miles Known ✓ Estimated ___ Unknown ___
Population: 0 Known ✓ Estimated ___ Unknown ___
Source: There are no listed intakes (surface water) in Oldham County, and no known private intakes. KY Active Public Drinking Water Systems Listing.

HRS SCORE SHEET DATE: 01/22/87

SITE NAME: Anaconda Ind. Magnet Wire and Cable

EPA ID #: KYD042943423 REVIEWER: Keith Burch

HRS FACTOR SCORES	Score	Default	Known	Estimate
1) Toxicity/persistence (TP)	12	none	✓	
2) Waste quantity (WQ)	1	(1)		✓
3) Containment (Groundwater) (C_{gw})	(3)	(3) ✓		✓
4) Depth to aquifer of concern (D_{ac})	6	(6)		✓
5) Distance to nearest well/population (DP_g)	12	none		✓
6) Containment (Surface Water) (C_{sw})	(3)	(3) ✓		
7) Distance to surface water (D_{sw})	2	(6)		✓
8) Distance to surface intake/population (DP_s)	0	none	✓	

HRS GROUNDWATER ROUTE SCORING:

a) If observed release: $S_{gw} = \frac{(TP + WQ)(DP_g + 9)}{12.74}$ = 21.43

b) If no observed release: $S_{gw} = \frac{(D_{ac} + 7)(TP + WQ)(DP_g + 9)(C_{gw})}{573.3}$ = 18.57

SURFACE WATER ROUTE SCORING

If observed release: $S_{sw} = \frac{(TP + WQ)(DP_s + 9)}{14.3}$ = 8.18

If no observed release: $S_{sw} = \frac{(D_{sw} + 5)(TP + WQ)(DP_s + 9)(C_{sw})}{643.5}$ = 3.82

MULTIMEDIA HRS SCORING

Do not score the air route unless an observed release is known to have occurred.

$$S_m = \sqrt{\frac{S_{gw}^2 + S_{sw}^2}{1.73}} = \text{OR } \frac{13.26}{\text{NOR } 10.96}$$

The scoring in above steps is based on the following default scores:

1) the sum of the scores for net precipitation, permeability, and physical state is 7,
2) the groundwater use is for drinking and the score used is 9.
3) the sum of the scores for slope/terrain, rainfall and physical state is 5,
4) the sum of the scores for surface water use and distance to sensitive environments is 9.

If these assumptions are known to be substantially incorrect, complete an HRS scoring sheet.

RCRA/NPL POLICY QUESTIONNAIRE FOR INITIAL SCREENING

Site Name Anaconda, Ind. Magnet Wire and Cable

City LaGrange State Kentucky

Facility I.D. Number KYD042943423

Type of Facility: Generator ✓ Transporter ___ TSD ___

I. RCRA APPLICABILITY	yes	no
Does the facility have RCRA interim status?	___	✓
Did the facility ever have RCRA interim status?	___	✓
Does the facility have a final or post-closure permit? If so, date issued _____	___	✓
Is the facility a non-notifier that has been identified by States or EPA?	___	✓
Is the facility a known or possible protective filer?	___	✓

STOP HERE IF ALL ANSWERS TO QUESTIONS IN SECTION I ARE NO

II. FINANCIAL STATUS		
Is the facility owned by an entity that has filed for bankruptcy under federal laws (Chapter 7 or 11) or State laws?	___	___

If yes, what has it filed under?
Chapter 7___ Chapter 11___ Other___

III. ENFORCEMENT		
RCRA Status		
Has the facility lost authorization to operate via LOIS, 3005(c) permit denial, 3008(h) IS termination, 3005(d) permit revocation?	___	___
Has the facility's Interim Status been terminated via another mechanism (i.e. administrative termination)?		

CERCLA Status

What CERCLA financed remedial or removal activities have been initiated at the site? (RI/FS, RD/RA, O&M, forward planning, and removal; does not include enforcement or PA/SI activities)

Enforcement Status

	YES	
In general, would you characterize the facility as demonstrating an unwillingness to undertake corrective action based on prior State, CERCLA or RCRA actions?	✓	
If yes, please describe and cite the authorities exercised.		
Is the owner/operator a party to any enforcement action at the site?		
If not, why not?		

Are any PRPs (including owner/operators) undertaking remedial studies or action in response to CERCLA enforcement authorities? What is the extent/type of work that has been completed (RI/FS, etc.) and who (generators, owner/operat etc.) is conducting the work?